



COUNTY BOROUGH OF BURNLEY.

REPORT
OF THE
Medical Officer of Health
ON THE
Public Health and Sanitary Administration
FOR THE YEAR
1954

D. C. LAMONT, M.B., Ch.B., D.P.H.
MEDICAL OFFICER OF HEALTH,
PRINCIPAL SCHOOL MEDICAL OFFICER,

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HEALTH COMMITTEE

1954-55.

HIS WORSHIP THE MAYOR (ALDERMAN J. HERBERT).

*MISS ALDERMAN M. GILLESPIE (Chairman).

*MRS. COUNCILLOR A. HEAP, M.B.E.

*COUNCILLOR W. HEAP (Vice-Chairman).

COUNCILLOR J. LORD.

COUNCILLOR J. CASSIDY.

*COUNCILLOR J. H. SUTCLIFFE.

COUNCILLOR J. W. CLITHEROE.

*MISS COUNCILLOR E. UTLEY.

COUNCILLOR P. DOHERTY.

*Members of the Standing Sub-Committee, the Mental Health Sub-Committee and Care and After-Care Sub-Committee.

PUBLIC HEALTH DEPARTMENT,
BURNLEY.

September, 1955.

MR MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you my twenty-fourth report on the health of the Borough.

The population in 1954 was estimated to be 83,090. After a slight increase in the post-war years, the population has declined since 1950, being reduced by 1,830 in the last four years.

The number of births and the birth rate show a slight decrease on the 1953 figures. The number of deaths is the same as in the previous year, and again the birth rate and death rate are practically the same. Four more infants died during the first year of life than in 1953, and consequently the infant mortality, which is 31·4, is higher and continues to be considerably above that of the whole country.

As the proportion of elderly people in the community is high, the deaths of persons over 65 years of age form 65% of the total. Between 45 and 64 years the deaths were 26·2%, and under 45 years 8·8%.

In my report I draw attention to the high suicide rate. In 1953 and 1954 the suicide rates have been higher than for any other of the last twenty five years, and during these two years it was practically three times as high as that of the whole country.

The Borough has again been reasonably free of epidemics of infectious disease. Apart from some increase in measles and dysentery, nothing of outstanding importance has been recorded. No outbreak of food poisoning has occurred during the six years in which it has been notifiable, although a few isolated cases have been reported from time to time.

The Home Help and Home Nursing Services have been hard pressed during the year to meet all the demands on them. The difficulty in recruiting suitable Home Helps has necessitated spending less time on each case. The shortage of Home Nurses shows no sign of being alleviated and the service is dependent to a considerable extent on local married women giving part-time assistance. The scheme for the extension of the Home Help Service by the employment of Night Attendants, although not widely required, is a boon to seriously ill people living alone.

The ample provision of maternity hospital beds in the area has resulted in a considerable reduction in domiciliary births in recent years. The domiciliary midwives now attend only about 35% of the total confinements of Burnley mothers.

Attendance of health visitors, when possible, at the paediatric out-patients' clinic and the children's wards of the General Hospital, which the Consultant Pædiatrician encourages, has improved co-ordination between the hospital and after-care services for children, and the recent hospital appointment of a medical officer solely for the care of chronic sick and geriatric cases, who also undertakes domiciliary visits, has ensured better liaison with the health visitors in the supervision of the elderly sick and infirm.

The continued shortage of sanitary inspectors made it necessary to curtail some routine work to enable progress to be made in the preparation of a programme of slum clearance. Over 1,300 houses have now been scheduled for inclusion in Clearance Schemes within the next seven years.

The transfer to the Local Health Authority of the functions of the Ministry of Food in respect of Welfare Foods for children and expectant mothers, in July 1954, was effected smoothly. The main distribution centre in Nicholas Street was retained and two of the staff of the Ministry, who were formerly engaged in the Welfare Food Service, were taken on to the staff of the Health Department. Distribution at the Child Welfare Centres has continued as before.

The report deals in detail with the various services administered by the Council as Local Health Authority under Part III of the National Health Service Act, 1946 and the sanitary and environmental health services. The willing co-operation of all members of the Health Department and the interest and encouragement of the members of the Health Committee have made possible the smooth running of these services.

I am,

Ladies and Gentlemen,

Your obedient servant,

D. C. LAMONT,

Medical Officer of Health.

SECTION I

STAFF AT 31st DECEMBER, 1954.

Medical Officer of Health and Principal School Medical Officer	D. C. LAMONT, M.B., Ch.B., D.P.H.
Deputy Medical Officer of Health	L. J. COLLINS, M.B., Ch.B., B.A.O., D.P.H.
Medical Officer, School Health Service, and Care of Mothers and Children, etc.	E. P. WHITAKER, M.B., Ch.B., M.R.C.S., L.R.C.P.
Part-time Medical Officer, Tuberculosis After-Care	G. GEMMILL, M.B., Ch.B., D.P.H.
Part-time Ophthalmic Surgeon	K. BROWN, M.C., M.B., Ch.B., D.O.M.S., D.O. (Oxon.)
Part-time Ear, Nose and Throat Surgeon	T. S. STEWART, M.B., Ch.B., F.R.C.S.
Part-time Medical Officer Ante Natal Clinic	MRS. A. REED, M.R.C.S., L.R.C.P.
Veterinary Officer and Chief Meat Inspector	J. K. SHAW, M.R.C.V.S.
Principal School Dental Officer	J. PILLING, L.D.S.
Dental Officer	K. JACKSON, L.D.S.
Borough Analyst	H. DEDICOAT, F.R.I.C.
Chief Sanitary Inspector and Inspector under Food and Drugs Act	F. SHUTTLEWORTH, Cert. R.S.I., Cert. R.S.I. (Meat and Foods).
Deputy Chief Sanitary Inspector	J. W. ORMEROD, Cert. R.S.I., Cert. (Meat and Foods).
Sanitary Inspectors	<p>W. GRANGE, Cert. R.S.I., Cert. (Meat and Foods). P. NEWBOLD, Cert. R.S.I., Cert. (Meat and Foods). M. STOTT, Cert. R.S.I., Cert. (Meat and Foods). W. R. TAYLOR, Cert. R.S.I. P. MOTTRAM, Cert. R.S.I. J. EDDLESTON, Cert. R.S.I. B. TAYLOR, Cert. R.S.I.</p>
Pupil Sanitary Inspectors—2.	Disinfectors—3.
Superintendent Nursing Officer and Supervisor of Midwives	MISS E. S. FRANKS, S.R.N., S.C.M., M.T.D., H.V. Cert.

Health Visitors (Care of Mothers and Children, Tuberculosis and School Health Service)	....	....	....	....	....	MISS E. MERCER, S.R.N., S.C.M., H.V. Cert. MRS. M. SIMPSON, S.R.N., S.C.M., H.V. Cert. MISS M. M. COWGILL, S.R.N., R.S.C.N., S.C.M., H.V. Cert. MISS F. ANFORTH, S.R.N., S.C.M., H.V. Cert. MRS. E. BOOTH, S.R.N., S.C.M., H.V. Cert. MRS. M. N. DANN, S.R.N., S.C.M., H.V. Cert. MRS. F. LISTER, S.R.N. MRS. M. E. MCKELVEY, S.R.N., S.C.M., H.V. Cert. MISS M. O'BRIEN, S.R.N., S.C.M., R.F.N., H.V. Cert. MISS L. WHITTAKER, S.R.N., C.M.B., Part I, H.V. Cert. MISS I. WILSON, S.R.N., S.C.M., H.V. Cert. MRS. D. WOODHEAD, S.R.N.
						Student Health Visitor (One vacancy).
Municipal Midwives	....	....	....	....	....	MRS. A. BINKS, S.R.N., S.C.M. MISS. S. CRYER, S.C.M. MISS E. LAYFIELD, S.C.M. MISS M. SIMPSON, S.C.M. MRS. E. SPENCER, S.R.N., S.C.M. MISS H. STANDEN, S.C.M. MRS. E. ANDERTON, S.R.N., S.C.M. MISS N. WILLIAMS, S.R.N., S.C.M. MISS E. GIBSON, S.C.M. MRS. M. A. FILON, S.C.M.
Educational Psychologist	....	....	....	....	....	MR. F. G. MAHONEY, B.A. (Hons. Psych.)
Orthoptist	....	....	....	....	....	MISS S. SUTCLIFFE, D.B.O.
Physiotherapist (Part-time)	....	....	....	....	....	MRS. P. BLACK, M.C.S.P.
Speech Therapist	....	....	....	....	....	MISS J. MURRAY, L.C.S.T.
Superintendent District Nursing Service	....	....	....	....	....	MISS M. FIRTH, S.R.N., C.M.B. Cert. Part 1, Q.I.D.N.S., H.V. Cert.
Assistant Superintendent	....	....	....	....	....	MRS. D. F. PICKLES, S.R.N., Q.I.D.N.S.
District Nurses (8 full-time ; 4 part-time)	....	....	....	....	....	MRS. A. DALY, S.E.A.N. MISS E. J. DIXON, S.C.M., S.E.A.N. MRS. A. HOWARTH, S.E.A.N. MISS C. MITCHELL, S.E.A.N. MRS. D. NEWTON, S.R.N., S.C.M., Q.I.D.N.S. MRS. O. NORRIS, S.R.N. MRS. D. PICKLES, R.M.P.A. MRS. E. A. PROCTOR, S.E.A.N. MRS. A. REID, S.R.N., Q.I.D.N.S. MRS. C. D. A. THOMPSON, S.R.N., S.C.M., Q.I.D.N.S. MRS. N. WILLIS, S.R.N. MRS. A. E. SMITH, S.R.N., S.C.N.

Day Nurseries:

Bank Hall MATRON—MISS L. WALLIS, S.R.N., S.C.M.
Nursing Staff 15.

Hargher Clough MATRON—MRS. H. McCUTCHEON, N.N.C.
Nursing Staff 6.

Mental Health Service:
Authorised Officers } W. PHILLIPS.
R. FELL, B.E.M., S.R.N., R.M.N., R.M.P.A.

Female Social Worker MISS A. BURKE, R.M.N., R.M.P.A.

Occupation Centre:
Supervisor MRS. D. MARSDEN.

Assistant Supervisor MRS. B. FOREST.

Domestic Help Service:
Organiser MISS J. SUTHERLAND.
Domestic Helps—44 whole-time, 2 part-time.

Ambulance Officer D. SCULLY, M.M.
Driver-Attendants 20.

Clerical Staff:
Chief Clerk H. V. HARTLEY, A.C.C.S., Cert. R.S.I.

} H. SIMPSON.
A. PILLING
W. BALDWIN.
R. BLAKELEY.
R. G. BARRY.
K. ANDERTON.
J. HOLT (H.M. Forces).
MISS M. BARTLE.
MRS. W. NEVE.
MISS M. HODGKINSON.

Clerks, School Health Service } S. JACKSON, S.E.A.N.
MISS N. HIRST.
MISS S. WILLS.
MISS M. MOORE.
MISS P. CATLOW.

Clerk Dental Attendants } MISS A. H. TAYLOR.
MISS D. DENT.

SECTION II

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

SUMMARY OF STATISTICS.

1.—GENERAL STATISTICS.

Area in Statute Acres	....	....	....	....	....	....	4,686 acres.
Area fully developed, or in course of development	....	....	....	....	....	....	3,300 acres.
Population, Census, 1951	....	....	....	....	....	....	84,950
Registrar General's Estimate of Population middle of 1954	....	....	....	....	....	....	83,090
Density of Population, i.e., Number of Persons per Acre built upon	....	....	....	....	....	....	25·2
Number of Houses in Borough, December, 1954	....	....	....	....	....	....	29,377
Number of Inhabited Houses (April, 1955) according to Rate Books	....	....	....	....	....	....	28,852
Number of New Houses Erected in 1954	....	....	....	....	....	....	185
Rateable Value (April, 1955/6)	....	....	....	....	....	....	£605,131
Sum represented by a Penny Rate Paid in 1955/6	....	....	....	....	....	....	£2,430

2.—EXTRACTS FROM VITAL STATISTICS.

(REGISTRAR GENERAL'S RETURN).

		M.	F.	Total	1954	1953
Live Births: Legitimate	....	562	544	1,106	1,106	1,113
Illegitimate	....	35	35	70	70	87
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
		597	579	1,176	1,176	1,200
Crude Birth Rate per 1,000 of estimated resident population	....			14·15	14·15	14·41
Adjusted for A.C. Factor (1·05)	....			14·85	14·85	14·98
Stillbirths: Legitimate	....	17	13	30	30	37
Illegitimate	....	1	1	2	2	4
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
		18	14	32	32	41
Rate per 1,000 total (live and still) births	....			26·49	26·49	33·04
Number of Deaths (Males 618, Females 585)	....			1,203	1,203	1,203
Crude Death Rate per 1,000 of estimated resident population	....			14·48	14·48	14·44
Adjusted for A.C. Factor (0·95)	....			13·75	13·75	13·57
Maternal Mortality			Deaths		Rate per 1,000	
					total live and still births.	
					1954	1953
Pregnancy, Childbirth, Abortion	....	....	NIL	....	0·00	0·00

		1954	1953
Number of Deaths of Infants under 1 year of age	....	37	33
Death Rate of Infants under 1 year of age:			
All Infants per 1,000 live births	....	31·46	27·50
Legitimate Infants per 1,000 Legitimate live births	....	30·74	26·05
Illegitimate Infants per 1,000 Illegitimate live births	....	42·85	46·00
Death Rates per 1,000 population from:—			
Pulmonary Tuberculosis	....	0·17	0·14
All forms of Tuberculosis	....	0·19	0·21
Respiratory Diseases (excluding Pulmonary Tuberculosis)	....	2·19	1·94
Influenza	....	0·12	0·13
Cancer	....	2·04	1·89
Notifiable Infectious Diseases (excluding Tuberculosis)	....	0·02	0·05
Death Rate from Diarrhoea and Enteritis of Children under 2 years of age, per 1,000 births	....	0·84	0·83
Deaths from Measles (all ages)	....	—	—
Deaths from Acute Poliomyelitis	....	—	—
Deaths from Whooping Cough (all ages)	....	1	1
Deaths from Meningococcal Infections	....	1	3
Deaths from Diarrhoea under two years of age	....	1	1

VITAL STATISTICS.

Live Births.

1,475 live births (757 males, 718 females) were registered in Burnley during 1954. After correction for 20 inward and 319 outward transferable births, a net total of 1,176 births, or a decrease of 24 on the total for 1953 is obtained.

The live birth rate was 14·15, as compared with 14·41 in 1953. In order, however, to compare the local rate with the rate for England and Wales, it must be adjusted, by a comparability factor, to make an approximate allowance for the way in which the sex and age distribution of the local population differs from that of England and Wales as a whole. The adjusted birth rate of Burnley for 1954 is 14·85. The Burnley rate is less than the rate for England and Wales, which is 15·2, and also less than that of the 160 County Boroughs and Great Towns, which is also 15·2.

The number of illegitimate live births was 17 less than in the previous year, the percentage of illegitimate births being 5·9 as compared with 7·25 in 1953.

Stillbirths.

During the year there were 32 stillbirths, giving a rate of 26·49 per 1,000 total (live and still) births, as compared with 33·04 in 1953.

Deaths.

One thousand five hundred and sixty one civilian deaths were registered in Burnley during the year. Of this number 407 deaths of non-residents, chiefly occurring in Public Institutions, have been excluded, leaving 1,154 deaths of residents. To this number has been added 49 deaths of Burnley people who have died in other districts.

After these corrections a net total of 1,203 deaths is obtained (males 618, females 585), giving a crude death rate of 14·48 per thousand of population, as compared with 14·44 for 1953 and 15·30, the average for the previous 10 years. The adjusted death rate for Burnley is 13·75, and is considerably higher than the death rate for England and Wales, which is 11·3, and also higher than that of the 160 County Boroughs and Great Towns, which is 11·1.

There were 43 deaths of children under 5 years of age, representing 3·7% of the total deaths; of these 37 were children under 1 year of age. 5 deaths were children between 5 and 15 years of age; 53 deaths were of persons aged 15 to 45 years; 316 between 45 and 65 years; and 786 or 65·1% of the total deaths were aged 65 years and upwards.

91·2% of the deaths were persons over 45 years of age.

Percentage of deaths in year groups according to age.

Ages	1911	1921	1931	1941	1951	1954
Under 1 year	27%	19%	8%	6%	2·8%	3·7%
1-5 years	12%	7%	4%	2%	0·9%	0·5%
5-15 years	4%	3%	2%	1%	0·8%	0·4%
15-45 years	15%	15%	15%	10%	5·3%	4·2%
45-65 years	21%	26%	31%	30%	25·9%	26·1%
65 years and over	21%	30%	40%	51%	64·3%	65·1%

Trend of Population.

The Registrar General's Estimate of population at the middle of 1954 is 83,090; 200 less than that of 1953. The population figure at the 1951 Census was 84,950.

In my report for 1953, I referred to the decline in the population of Burnley. This continued fairly steadily from 1914 to 1944, when a record low figure of 78,380 was reached. The population had fallen by 31,660 in the thirty years preceding 1944. This was followed by a temporary increase of about 5,800 during the five years after the end of the Second World War, but during the last four years, the population has again shown a downward tendency, with a loss of 1,860 between the census of 1951 and the middle of 1954.

The crude death rate of the Borough now exceeds the birth rate. We have a relatively high proportion of elderly people, and with a low and gradually falling birth rate, the proportion of younger people is steadily becoming less. Fortunately deaths in the younger age groups are now few in number. Whereas in 1921, 44% of the deaths occurred in persons under 45 years of age, to-day the corresponding figure is less than 9%.

Birth-rates, Death-rates, Analysis of Mortality, Maternal Death-rates, and Case-rates for certain Infectious Diseases in the year 1954.

(Provisional figures, supplied by the Registrar-General with the exception of those relating to Burnley).

	England and Wales	160 County Boroughs and Great Towns including London	160 Smaller Towns (Resident Populations 25,000 to 50,000 at 1951 Census)	London Adminis- trative County	Burnley
Rates per 1,000 Home Population.					
BIRTHS—					
Live	15.2	15.2	14.9	15.2	14.85(c)
Still	0.36	0.36	0.36	0.28	0.38
	23.4(a)	23.3(a)	24.0(a)	19.8(a)	26.49(a)
DEATHS—					
All Causes	11.3	11.1	11.3	10.7	13.75(c)
Malignant Neoplasm of Lungs and Bronchus	0.37	0.43	0.34	0.54	0.37
Tuberculosis	0.18	0.20	0.18	0.20	0.19
Whooping Cough	0.00	0.00	0.00	0.00	0.01
Diphtheria	0.00	0.00	0.00	—	0.00
Influenza	0.04	0.03	0.04	0.02	0.13
Coronary Disease	1.53	1.52	1.52	1.50	2.03
Acute Poliomyelitis (including Polioencephalitis)	0.00	0.00	0.00	0.00	0.00
Pneumonia	0.41	0.45	0.41	0.48	0.77
Rates per 1,000 Live Births					
Deaths under one year of age	25.5(b)	25.2	26.6	20.7	31.46

(a) Per 1,000 Total (Live and Still) Births.

(b) Per 1,000 related Live Births.

(c) Adjusted by Registrar-General's A.C.F. figure.

**VITAL STATISTICS OF WHOLE DISTRICT DURING 1954 AND THE PREVIOUS
10 YEARS.**

Year.	R.G's Population estimated to middle of each year.	Live Births.			Total Deaths Registered in the District		Transferable Deaths	Nett Deaths belonging to the District.				
		Live Births.		Number	Crude Rate	Number	Rate		Under 1 Year of Age.		At all Ages.	
		Uncorrected Number	Nett.						Number	Crude Rate	Numb'r	Crude Rate.
1944	78,380	1,445	1,358	17.33	1,497	19.09	339	58	56	41.24	1,216	15.52
1945	79,080	1,293	1,218	15.40	1,416	17.90	250	71	77	63.22	1,237	15.64
1946	82,680	1,654	1,591	19.24	1,456	17.63	315	67	71	44.63	1,208	14.61
1947	83,650	1,831	1,831	21.89	1,588	18.98	293	63	90	49.15	1,358	16.23
1948	84,560	1,528	1,467	17.35	1,469	17.37	327	62	73	49.76	1,204	14.24
1949	84,590	1,488	1,384	16.36	1,616	19.10	355	52	59	42.63	1,313	15.52
1950	84,920	1,568	1,347	15.86	1,690	19.90	442	62	66	49.00	1,310	15.43
1951	84,280	1,510	1,254	14.88	1,813	21.51	446	83	41	32.69	1,450	17.20
1952	83,860	1,482	1,182	14.09	1,515	18.06	392	72	37	31.30	1,195	14.25
1953	83,290	1,478	1,200	14.41	1,513	18.16	364	54	33	27.50	1,203	14.44
Aver- age 10 years	82,929	1,528	1,383	16.68	1,557	18.77	352	64	60	43.11	1,269	15.30
1954	83,090	1,475	1,176	14.15	1,561	18.76	407	49	37	31.46	1,203	14.48

COMPARATIVE STATEMENT OF VITAL STATISTICS.

YEAR 1954.

	Birth Rate	Death Rate	Infant Mortality Rate		Death Rate from Phthisis	Death Rate from other Tub. Diseases	Maternal Mortality Rate (per 1000 total Live and Still Births)		
			Year 1954	Average 5 years 1949-53			Maternal causes excluding abortion	Due to abortion	Total maternal mortality
England and Wales ...	15.2	11.3	25.5	29	*	*	0.58	0.11	0.69
160 Great Towns	16.8	12.0	29.1	33	*	*	*	*	*
Birkenhead	17.7	12.7	28.5	34.8	0.16	0.02	0.37	....	0.37
Burnley	14.86	13.76	31.46	36.62	0.17	0.02	....	....	....
Bury	14.66	14.25	33.0	30.0	0.24	0.02	1.14	....	1.14
Halifax	14.6	14.9	33.05	31.56	0.18	0.02	0.68	....	0.68
Liverpool ...	20.0	11.4	31.0	37.0	0.29	0.01	0.37	0.12	0.49
Manchester..	16.94	12.2	29.47	35.24	0.27	0.03	0.41	0.08	0.49
Oldham	14.26	15.07	26.81	38.39	0.20	0.02	....	....	....
Preston	15.4	11.88	27.0	35.0	0.19	0.008	....	0.54	0.54
Rochdale	14.3	13.8	23.0	42.0	0.15	0.01	....	0.78	0.78
Salford	16.72	12.02	30.0	39.6	0.23	0.01	1.36	....	1.36
St. Helens....	17.0	10.9	41.0	40.0	0.25	0.01	1.03	0.52	1.55
Stockport	14.8	12.4	37.81	35.18	0.08	0.03	0.92	....	0.92
Wallasœy	16.88	10.88	25.12	30.98	0.11	0.03	....	....	....
Wigan	14.75	11.37	27.0	42.6	0.29	0.01	....	....	....

* Not available.

Showing Birth Rates, Mortality Rates from all causes, from Tuberculosis of the Lungs, Respiratory Diseases and Malignant Diseases, together with Infantile Mortality and Infantile Diarrhoea Death Rates per 1,000 Births.

Year	Popula-tion	Crude Birth Rate	Crude Death Rate	Mortality Rates per 1,000 Population from		Infantile Mortality per 1,000 related Live Births, England and Wales
				Pul-monary Tuber-culosis	Respir' y Diseases (excluding Pulmonary Tuberculosis)	
1882-1886	—	38.9	23.2	2.31	5.15	142
1887-1891	—	35.9	22.2	1.64	6.21	145
1892-1896	—	35.1	21.9	2.06	5.27	151
1897	93,033	33.8	22.1	2.21	3.60	156
1898	94,036	31.9	19.0	1.82	3.58	160
1899	95,039	29.9	23.6	1.78	4.22	163
1900	96,041	30.5	19.7	1.67	4.23	154
1901	97,043	27.5	18.9	1.65	3.68	151
Average 5 years				20.7	1.83	157
1902	98,158	29.6	19.3	1.44	3.96	175
1903	99,061	27.3	18.7	1.51	3.88	132
1904	99,971	26.8	19.4	1.49	3.62	145
1905	100,889	26.3	16.6	1.46	0.73	128
1906	101,816	28.0	19.9	1.38	4.04	132
Average 5 years				18.8	3.73	134
1907	102,751	29.0	17.7	1.46	0.70	202
1908	103,696	28.6	18.2	1.23	4.14	118
1909	104,648	25.4	16.3	1.15	3.90	120
1910	105,610	25.4	16.5	1.03	3.18	109
1911	106,322	23.2	18.1	1.04	3.16	105
Average 5 years				17.4	0.73	130
1912	108,012	23.0	15.0	0.85	3.36	168
1913	109,021	22.8	16.8	0.96	3.31	210
1914	110,040	23.5	16.4	1.02	3.77	110
1915	103,098	19.5	16.9	0.88	4.08	116
1916	100,183	16.5	17.3	0.94	3.76	91
Average 5 years				16.5	0.90	102

1917	93,779	14.4	16.0	1.12	1.43
1918	90,770	14.3	18.9	0.94	3.44
1919	102,391	15.6	15.2	4.02	4.02
1920	105,030	23.3	14.1	0.91	3.67
1921	105,300	22.3	13.6	0.72	2.90
Average 5 years		18.0	15.6	0.85	3.35
1922	105,100	18.6	15.4	0.87	3.28
1923	104,800	17.4	13.4	0.90	2.69
1924	103,400	16.4	14.8	0.70	3.59
1925	102,300	16.0	14.8	0.81	2.16
1926	99,600	16.1	13.2	0.69	2.25
Average 5 years		16.9	14.3	0.79	3.00
1927	99,270	15.2	15.4	0.72	2.21
1928	100,700	15.0	13.3	0.86	1.72
1929	100,200	14.0	15.0	0.74	1.14
1930	100,200	13.35	12.7	0.70	1.36
1931	99,180	13.03	14.2	0.75	1.78
Average 5 years		14.11	14.1	0.75	1.84
1932	97,210	12.0	13.0	0.71	1.06
1933	95,900	12.1	14.6	0.69	1.23
1934	94,300	11.8	13.5	0.57	1.06
1935	93,100	11.65	14.7	0.68	1.68
1936	91,390	12.22	14.13	0.60	1.21
Average 5 years		11.95	14.0	0.65	1.25
1937	89,670	11.71	15.53	0.61	1.43
1938	88,650	11.77	14.06	0.69	1.21
1939	87,310	12.53	15.47	0.59	1.03
1940	82,980	12.42	17.36	0.66	1.63
1941	82,350	12.02	16.16	0.69	1.20
Average 5 years		12.09	15.72	0.65	1.30
1942	80,340	14.0	15.30	0.75	1.17
1943	79,070	16.52	16.46	0.51	1.54
1944	78,380	17.33	15.52	0.59	1.36
1945	79,080	15.40	15.64	0.68	1.60
1946	82,680	19.24	14.61	0.43	1.52
Average 5 years		16.49	15.51	0.59	1.44
1947	83,650	21.89	16.23	0.44	1.91
1948	84,560	17.35	14.24	0.48	1.22
1949	84,590	16.36	15.52	0.45	1.63
1950	84,920	15.86	15.43	0.29	1.64
1951	84,280	14.88	17.20	0.35	2.17
Average 5 years		17.27	15.72	0.40	1.71
1952	83,860	14.09	14.25	0.27	1.63
1953	83,290	14.41	14.44	0.14	1.94
1954	83,090	14.15	14.48	0.17	2.19

REGISTRAR GENERAL'S SHORT LIST.

CLASSIFICATION OF CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN
THE COUNTY BOROUGH OF BURNLEY DURING 1954.

Causes of Death	Sex	0—	1—	5—	15—	25—	45—	65—	75—	All Ages
1. Tuberculosis, respiratory	M	—	—	—	—	3	9	—	1	13
	F	—	—	—	—	—	1	—	—	1
2. Tuberculosis, other	M	—	—	—	—	—	1	—	—	1
	F	—	—	—	1	—	—	—	—	1
3. Syphilitic disease.....	M	—	—	—	—	1	1	—	—	2
	F	—	—	—	—	—	—	—	1	1
4. Diphtheria	M	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—
5. Whooping cough.....	M	—	—	—	—	—	—	—	—	—
	F	1	—	—	—	—	—	—	—	1
6. Meningococcal infections	M	—	—	—	—	—	—	—	—	—
	F	—	1	—	—	—	—	—	—	1
7. Acute poliomyelitis	M	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—
8. Measles	M	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—
9. Other infective and parasitic diseases..	M	—	—	—	—	1	1	—	—	2
	F	1	—	—	—	—	—	—	—	1
10. Malignant neoplasm, stomach	M	—	—	—	—	—	4	9	8	21
	F	—	—	—	—	—	4	6	6	16
11. Malignant neoplasm, lung, bronchus.....	M	—	—	—	—	1	19	4	2	26
	F	—	—	—	—	1	2	2	—	5
12. Malignant neoplasm, breast	F	—	—	—	—	2	9	2	3	16
13. Malignant neoplasm, uterus	F	—	—	—	—	1	5	2	1	9
14. Other malignant and lymphatic neoplasms.....	M	—	—	—	—	1	22	8	4	35
	F	—	—	—	—	1	13	14	13	41
15. Leukæmia, aleukæmia	M	—	—	1	—	—	—	—	—	1
	F	—	—	—	—	—	1	—	—	1
16. Diabetes	M	—	—	—	—	—	—	4	1	5
	F	—	—	—	—	—	1	2	1	4
17. Vascular lesions of nervous system ..	M	—	—	—	—	—	16	26	32	74
	F	—	—	—	—	2	18	34	51	105
18. Coronary disease, angina	M	—	—	—	—	2	44	39	20	105
	F	—	—	—	—	—	9	35	20	64

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE COUNTY BOROUGH
OF BURNLEY—(Continued).

Causes of Death	Sex	0—	1—	5—	15—	25—	45—	65—	75—	All Ages
19. Hypertension with heart disease	M	—	—	—	—	—	3	6	5	14
	F	—	—	—	—	—	4	—	6	10
20. Other heart disease	M	—	—	—	—	3	13	21	38	75
	F	—	—	—	—	3	16	25	74	118
21. Other circulatory disease	M	—	—	—	—	—	2	5	10	17
	F	—	—	—	—	2	6	4	12	24
22. Influenza	M	—	—	—	—	—	1	1	5	7
	F	—	—	—	—	—	1	1	2	4
23. Pneumonia	M	9	1	—	—	—	7	8	15	40
	F	—	—	—	—	2	4	12	6	24
24. Bronchitis	M	—	—	—	—	3	22	27	9	61
	F	—	1	—	—	—	8	4	16	29
25. Other diseases of respiratory system	M	—	—	—	—	—	1	4	4	9
	F	—	—	1	—	—	3	2	2	8
26. Ulcer of stomach and duodenum	M	—	—	—	—	2	3	5	1	11
	F	—	—	—	—	—	—	1	1	2
27. Gastritis, enteritis and diarrhoea	M	1	—	—	—	—	—	—	—	1
	F	—	—	—	—	—	—	—	—	—
28. Nephritis and nephrosis	M	—	—	—	—	1	1	2	2	6
	F	—	—	—	—	—	3	3	—	6
29. Hyperplasia of prostate	M	—	—	—	—	—	1	4	3	8
30. Pregnancy, childbirth, abortion	F	—	—	—	—	—	—	—	—	—
31. Congenital malformations	M	5	—	—	—	—	—	—	—	5
	F	4	1	—	—	—	—	—	—	5
32. Other defined and ill-defined diseases	M	11	—	—	—	1	8	13	14	47
	F	4	1	1	1	3	16	14	28	68
33. Motor vehicle accidents	M	—	—	—	1	1	1	1	1	5
	F	—	—	—	—	1	—	—	—	1
34. All other accidents	M	—	1	2	1	2	2	4	—	12
	F	1	—	—	—	—	—	1	7	9
35. Suicide	M	—	—	—	—	4	7	3	1	15
	F	—	—	—	—	3	5	—	2	10
36. Homicide and operations of war	M	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—
TOTAL (all causes)	M	26	2	3	2	26	189	194	176	618
	F	11	4	2	2	21	129	164	252	585

Causes of Death.

The table given below shows the chief causes of death.

Diseases of the heart were again the causes of the highest number of deaths, 32% of the deaths being attributed to cardiac lesions. Respiratory diseases, other than tuberculosis, took second place, with deaths from intra-cranial vascular lesions almost equal in number.

During the last two years, cancer has taken fourth place in the causation of deaths, whereas in the years 1949 to 1952, it was second in order. Nevertheless as will be seen from the table on page 22, the number of cancer deaths has remained fairly uniform in recent years.

Deaths from tuberculosis are now only one-tenth of what they were at the beginning of the present century. Suicides and deaths following accidents and other forms of violence are now almost twice as many as deaths from tuberculosis.

		No. of Deaths	Percentage of Total Deaths
Heart Diseases	....	386	32·0
Respiratory Diseases (other than Tuberculosis)	....	182	15·1
Intra-Cranial Vascular Lesions (Cerebral Hæmorrhage, etc.)	....	179	14·9
Cancer	....	169	14·0
Other Diseases of the Circulatory System	....	41	3·4
Accidents, Violence, etc.	....	27	2·2
All forms of Tuberculosis	....	16	1·3
Ulcer of Stomach and Duodenum	....	13	1·0
Nephritis	....	12	0·9
Influenza	....	11	0·9

Deaths in Institutions.

Eight hundred and twenty eight deaths occurred in the Burnley Hospitals during the year. Those shown in the following list as having died in the Maternity Hospital are mainly deaths of newly-born infants.

		Deaths of Burnley Residents	Deaths of Non-Residents	Total
General Hospital	....	299	267	566
Victoria Hospital	....	116	107	223
Bank Hall Maternity Hospital	....	19	10	29
Marsden Hospital	....	6	4	10
	Total	440	388	828

Infant Mortality.

Fifty deaths of infants under one year of age were registered during the year 1954. After correction for inward and outward transferable deaths, a net total of 37 deaths is obtained, or 4 more than the net infant deaths registered in 1953.

Live Births		Infantile Deaths		Infant Death Rate per 1,000 Live Births		
Males	Females	Males	Females	Males	Females	Both Sexes
597	579	26	11	43.6	19.0	31.46

Death rate amongst legitimate infants per 1,000 legitimate births 30.74

Death rate amongst illegitimate infants per 1,000 illegitimate births 42.85

Twenty four deaths occurred of infants within four weeks of birth, giving a **neo-natal mortality** of 20.40 per 1,000 live births.

The infant mortality is higher than that of the previous year, and is also considerably higher than that of the whole country.

The neo-natal mortality also shows an increase, being slightly higher than that of each of the previous three years.

INFANT MORTALITY DURING THE YEAR 1954.

NET DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR.

Cause of Death	Age at Death										*General Hospital	*Victoria Hospital	*Bank Hall Hospital	*Marsden Hospital			
	Under 1 day		1-7 days		Over 1 week to 4 weeks		Over 1 month to 6 mths		Over 6 months to 12 mths								
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Both Sexes						
Gastro-Enteritis	—	—	—	—	—	—	1	—	—	—	1	—	—	1	—		
'Whooping Cough	—	—	—	—	—	—	—	1	—	—	1	1	—	—	—		
Pneumonia ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
(all forms)	—	—	2	—	1	—	4	—	3	—	10	—	10	3	1		
Convulsions	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Prematurity	4	3	1	—	—	—	—	—	—	—	5	3	8	1	7		
Spina Bifida and Meningocele ..	—	—	—	—	2	2	—	—	—	—	2	2	4	—	4		
Other Congenital Malformations	—	1	—	1	1	—	—	—	—	—	1	2	3	—	3		
Birth Injuries	1	—	1	—	—	—	1	—	—	—	3	—	3	—	2		
Atelectasis ..	2	—	—	—	—	—	—	—	—	—	2	—	2	—	2		
All other causes	—	—	—	1	—	1	2	1	—	—	2	3	5	2	1		
Totals all causes	7	4	4	2	4	3	8	2	3	—	26	11	37	6	4		
															2		

* Denotes that the figures shown in these columns are also included in the age groups.

Diarrhoea and Enteritis.

During the year there was only one death from diarrhoea and enteritis in children under two years of age.

Cancer.

The deaths from cancer, which were eleven more than in 1953, were 14% of the total deaths. Although no very marked increase in the annual number of deaths from malignant disease occurred during the last twenty years, the percentage of deaths which are attributable to this cause showed a fairly steady upward tendency during the last two decades.

						Cancer deaths as a percentage of total deaths.
Average for years 1935-39	....	....	....	....	....	11·2%
„ 1940-44	....	....	....	....	....	12·1%
„ 1945-49	....	....	....	....	....	12·9%
„ 1950-54	....	....	....	....	....	13·6%

The deaths from Cancer during the last twenty years:

Year	No. of Deaths from Cancer	% of total Deaths	Year	No. of Deaths from Cancer	% of total Deaths
1935	156	11·4	1945	160	12·9
1936	152	11·7	1946	169	13·9
1937	145	10·4	1947	160	11·8
1938	151	12·1	1948	153	12·7
1939	142	10·6	1949	176	13·4
1940	164	11·4	1950	173	13·2
1941	156	11·7	1951	193	13·3
1942	160	13·0	1952	173	14·5
1943	176	13·5	1953	158	13·1
1944	132	10·9	1954	169	14·0

Suicide.

The number of persons who commit suicide in Burnley is high. The death rate from suicide for Burnley, as compared with the whole country, is shown in the following table.

Suicide Rate per 1,000 of Population.

Year	Burnley			England and Wales	
	No. of Suicides			Rate	Rate
	Male	Female	Total		
1945	8	5	13	0·16	0·08
1946	5	6	11	0·13	0·09
1947	2	10	12	0·14	0·10
1948	14	7	21	0·25	0·11
1949	9	11	20	0·23	0·11
1950	17	5	22	0·26	0·10
1951	11	3	14	0·16	0·10
1952	9	7	16	0·19	0·09
1953	14	9	23	0·27	0·10
1954	15	10	25	0·30	0·11

The suicide rates for the years 1953 and 1954 are higher than for any other year in the last 25 years, and during the last ten years the average annual death rate from suicide in Burnley has been more than double that of the whole country.

Generally more men than women commit suicide. In the last ten years, 104 men met their deaths in this manner, as compared with 73 women ; 60 (or 58%) of the men being under 45 years of age, as compared with 49 (or 67%) of the women.

Carbon monoxide poisoning is the commonest cause of suicidal deaths. During the last ten years, 65 men and 52 women adopted this method, the majority of both sexes being under 45 years of age ; 18 men and 9 women drowned themselves ; 10 men and 2 women hanged themselves ; poisoning by swallowing drugs, corrosives, etc., caused the deaths of 5 men and 6 women.

It is not possible to suggest any reason why so many Burnley residents commit suicide. The suicide rate does not appear to be related in any way to industrial depression. Although the rate was excessive in 1933, when trade was bad, it was also excessive in 1948, 1949 and 1950, when there was full employment. Unfortunately the commonest means of death—the gas oven, the canal and the mill "lodges" are too easily available.

SECTION III

PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

The incidence and deaths from some of the notifiable diseases (apart from Tuberculosis) during 1954 are as follows:—

	No. of Cases Notified	Case Rate per 1,000 of pop'lat'n	No. of Deaths	Mortality per. 1,000 Cases
Scarlet Fever	138	1·66	—	—
Whooping Cough	357	4·29	1	2·80
Diphtheria	—	—	—	—
Measles	226	2·72	—	—
Dysentery	65	0·78	—	—
Ophthalmia Neonatorum	—	—	—	—
Puerperal Pyrexia	2	0·02	—	—
Erysipelas	15	0·18	—	—
Para-typhoid	—	—	—	—
Acute Polio-myelitis	—	—	—	—
Food Poisoning	3	0·03	—	—

SMALLPOX:—No notifications were received during 1954.

SCARLET FEVER:—One hundred and thirty eight cases occurred throughout the year, of which 30 were isolated in the Marsden Hospital.

DIPHTHERIA:—No notifications were received in 1954.

MEASLES:—Two hundred and twenty six cases of measles were notified as compared with 114 in the previous year. In addition 76 cases of German Measles occurred.

WHOOPING COUGH increased during the year, 357 cases being notified, 250 of which were children under 5 years of age.

PNEUMONIA:—Sixty seven cases of primary pneumonia were notified, this number being 4 less than in 1953. There was also 1 notification of pneumonia due to influenza during the year.

ENTERIC GROUP OF DISEASES:—No cases of typhoid or paratyphoid fever were notified during the year.

MENINGOCOCCAL INFECTION:—Four notifications were received during 1954.

DYSENTERY:—Sixty five cases occurred during the year.

FOOD POISONING:—Three cases of food poisoning were notified during the year, but probably more occurred which were not brought to the notice of the Department. All were single cases, two being identified as due to *Salmonella Typhi-murium* organisms. The cause of the third was not ascertained.

Distribution of Notifiable Infectious Diseases during 1954.

NOTIFIABLE DISEASES	Total cases notified in each Ward and Institution														Total	
	Lanehead	St. Andrew's	Daneshouse	Calder	Fulledge	Burnley Wood	Healey Wood	Trinity	Whittlefield	Gannow	Lowerhouse	General Hospital	Victoria Hospital	Bank Hall Maternity Hospital	Marsden Hospital	
Scarlet Fever	9	17	9	10	7	6	15	15	13	9	18	—	—	—	138	
Whooping Cough	19	32	11	26	29	48	29	30	17	46	37	—	—	—	357	
Diphtheria and Mem. Croup	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Measles and German Measles	19	13	10	9	36	35	44	22	33	19	26	29	4	—	303	
Acute Primary Pneumonia	5	13	6	7	4	5	5	4	7	4	3	4	—	—	67	
Acute Influenza	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
Pneumonia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	
Meningococcal Infection	—	—	—	—	—	1	—	—	1	—	—	—	—	—	65	
Dysentery	1	7	10	1	2	9	6	3	3	4	2	3	—	—	2	
Ophthalmia Neonatorum	—	—	—	—	—	—	4	—	—	—	—	—	—	—	—	
Puerperal Pyrexia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Enteric Fever (excl. Para-Typhoid)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Erysipelas	3	—	1	5	3	2	2	2	1	—	—	—	—	—	15	
Tuberculosis of Lungs	6	2	1	11	10	5	2	7	7	6	10	6	1	1	83	
Other forms of Tuberculosis	—	1	1	1	1	1	1	—	—	—	1	—	—	—	8	
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute Polio-myelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute Polio-Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Food Poisoning	—	1	—	—	—	—	—	—	—	—	—	2	—	—	3	
Totals	63	86	49	58	93	117	103	77	97	65	95	104	14	2	22	1046

*Primary Notifications.

Age Grouping of Notifiable Infectious Diseases during 1954.

Notifiable Diseases	Total cases notified	At ages—Year														Total cases removed to Hospital
		Under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-25	25-35	35-45	45-65	65 and over	—		
Scarlet Fever	138	2	3	8	9	10	74	21	6	2	2	1	1	1	30	
Whooping Cough	357	23	39	57	68	63	101	2	—	—	—	—	—	—	8	
Diphtheria and Memb. Croup	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Measles	226	10	14	24	22	34	120	1	—	—	—	—	—	—	—	
German Measles	77	6	14	7	7	6	32	3	—	—	—	—	—	—	12	
Acute Primary Pneumonia	67	4	4	1	2	2	—	2	—	5	6	18	1	13	24	
Acute Influenza Pneumonia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	3	
Meningococcal Infection	4	—	2	—	1	—	1	—	—	—	—	—	—	—	—	
Dysentery	65	5	3	3	8	8	19	—	6	8	2	3	—	—	17	
Ophthalmia Neonatorum	—	2	—	—	—	—	—	1	—	—	—	—	—	—	—	
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Enteric Fever (excl. Para-Typhoid)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Erysipelas	15	—	—	—	—	—	—	—	1	—	4	9	1	1	1	
Tuberculosis of Lungs	83	2	—	—	1	2	6	28	26	5	10	4	4	4	61	
Other forms of Tuberculosis	8	—	—	—	—	2	2	2	2	—	—	—	—	—	5	
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	1	2	2	2	
Food Poisoning	3	—	—	—	—	—	—	—	—	—	1	—	—	—	—	
TOTALS.	1046	52	79	100	117	126	356	37	47	45	22	45	20	163		

Number of Notifications of Infectious Diseases for the twenty years 1935-1954.

Disease	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954
Scarlet Fever	214	120	162	146	80	253	225	486	248	131	196	173	177	171	166	237	147	145	169	138
*Whooping Cough	—	—	—	—	*8	261	235	19	197	142	123	87	191	315	143	536	269	389	347	357
Diphtheria and Memb. Croup	254	204	284	192	68	53	60	50	38	66	183	71	33	16	9	1	—	1	—	—
Measles and German Measles	3108	202	1696	345	1008	1347	1470	867	1434	140	1634	739	885	1361	756	1509	1236	2412	168	503
Acute Primary Pneumonia	158	138	178	161	176	201	150	144	108	91	100	57	81	85	85	116	106	101	71	67
Acute Influenza Pneumonia	18	18	45	—	10	26	19	4	28	2	1	8	6	3	16	2	19	—	7	1
Meningococcal Infection	3	—	1	1	2	14	23	20	8	2	5	4	9	2	1	4	3	—	1	4
Dysentery	—	—	—	—	—	62	22	11	10	96	91	49	—	62	13	88	25	10	5	65
Ophthalmia Neonatorum..	7	12	9	11	16	21	32	25	8	8	7	12	6	3	1	3	1	2	1	—
Puerperal Pyrexia	30	24	35	26	43	29	29	25	23	20	4	29	23	17	30	27	34	41	5	2
Smallpox.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Para-Typhoid & Enteric Fevers	—	1	1	—	1	12	—	4	3	2	1	2	3	—	1	—	2	2	—	—
Erysipelas	60	60	48	46	36	53	36	39	28	23	28	26	22	15	19	20	22	16	14	13
†Tuberculosis of Lungs	63	70	66	69	60	78	78	87	73	74	62	93	75	93	65	68	59	69	59	83
†Other forms of Tuberculosis..	33	46	35	50	40	34	34	34	26	28	16	22	19	19	15	16	16	14	17	8
Malaria	1	—	—	—	1	—	—	—	—	—	2	6	1	1	—	—	—	—	—	—
Acute Polio-myelitis	—	—	—	—	2	1	—	—	—	—	—	2	1	2	4	4	11	4	6	—
Acute Polio-encephalitis...	—	1	—	—	—	1	—	1	—	—	—	—	1	—	—	—	—	—	—	—
Encephalitis	3	1	—	—	1	2	4	—	—	1	2	1	—	—	—	—	—	—	—	—
†FoodPoisoning	—	—	—	—	—	—	—	—	—	—	—	—	‡6	12	6	9	3	3	3	3
TOTALS	3952	897	2560	1048	1551	2448	2417	1816	2232	826	2455	1381	1533	2165	1330	2643	1956	3215	873	1046

† Primary notifications.

* Compulsorily notifiable from 6th November, 1939.

‡ Notifiable from 1949.

DISINFECTION.

Total visits to houses in connection with infectious diseases	778
Total number of premises disinfected	172
Total articles of bedding, etc., disinfected	2947
Library books disinfected	276
Cleansing baths given to verminous persons (74 persons), scabies cases (18 persons) and persons removed to the Council houses, etc.	117

Vaccination against Smallpox.

During the last few years there has been an improvement in the percentage of infants being vaccinated against smallpox. Prior to the inception of the National Health Service in 1948, when vaccination was compulsory, the percentage of infants who were vaccinated during the first year of life varied between 25% and 35%. When, in 1948, the Vaccination Acts ceased to be operative, the numbers of infant vaccinations fell alarmingly, and between 1948 and 1950, only 10%, or less, of infants were being vaccinated. Intensification of propaganda, particularly in the infant welfare centres, and the provision of a vaccination service in these centres, has resulted in a gradual improvement during the last four years, so that in 1954, about 32% of infants were vaccinated in the first year of life.

Return showing number of vaccinations and re-vaccinations during 1954.

	Primary Vaccinations					Re-Vaccinations				
	Ages at Date of Vaccination.					Ages at Date of Vaccination				
	Under 1	1-4	5-14	15 and over	Total	Under 1	1-4	5-14	15 and over	Total
Local Health Authority Clinics ..	330	13	1	9	353	—	—	2	15	17
Medical Practitioners ..	114	20	21	46	201	—	2	4	62	68
TOTALS	444	33	22	55	554	—	2	6	77	85

Immunisation against Diphtheria and Whooping Cough.

The extent to which the child population of the Borough is protected against diphtheria is still not satisfactory, despite the facilities which are readily available free of charge for this protection to be given. Of the 1,200 children born in 1953, only 622 (or 52%) were immunised against diphtheria by the end of 1954. The number of children under 15 years of age who received primary immunisation in 1954 was 958, which is 163 more than in the previous year. It is important that re-inforcing or "booster" injections should be given to those already immunised a few years previously, in order to maintain full immunity, 628 children received these re-inforcing injections.

In order to estimate the effective immunity against diphtheria of the child population, the numbers still immune following primary injections in recent years and those whose immunity has been maintained by re-inforcing injections are only taken into consideration. Thus, although at some time in their lives, 50% of the children under five years of age and 74% of those aged 5 to 14 years were given injections, the effective immunity index is only 32.5%.

The following are the percentages of children who had a satisfactory degree of immunity at 31st December, 1954:—

Age Group.							Immunity Index.
Under 1 year	....	....	....	....	....	....	11·6%
1-4 yrs. incl.	....	....	....	....	....	....	60·0%
5-14 yrs. incl.	....	....	....	....	....	....	23·0%
Total under 15 years	....	....	....	....	....	....	32·5%

In May, 1954, the Ministry of Health approved a proposal to provide immunisation against whooping cough, as follows:—

“The Local Health Authority will make such arrangements for immunisation against whooping cough as it may consider expedient, having regard to the advice of the Medical Officer of Health, who will be responsible for deciding the antigen(s) to be used and made available to general practitioners, and for keeping records directed towards assessing the value of this form of inoculation.”

Thereafter immunisation against whooping cough was officially made available at the infant welfare centres and the Elizabeth Street clinic premises, and whooping cough antigen was given either in combination with diphtheria antigen or separately. By the end of the year, 812 children were immunised against whooping cough and 36 who had been immunised privately in previous years were given re-inforcing injections.

Apathy of parents regarding the importance of immunisation against diphtheria has been apparent for a number of years, as diphtheria has been absent from the Borough for five years. Whooping cough being present to some extent every year, and being a distressing disease, is rightly viewed with apprehension by parents of young children, and they now show an increasing desire to have their children protected at an early age. The fact that combined immunisation is now being offered will no doubt result in a larger number being effectively immunised against both diseases. Efforts are being made through Infant Welfare centres, by domiciliary visits of health visitors and other means to encourage acceptance of immunisation against both diseases in the first year of life, as the first year is the most dangerous period for whooping cough infection.

As immunisation against whooping cough is still in a very early stage, several years will elapse before evidence of reduced incidence of the disease will become apparent.

Return showing number of Immunisations and Re-Inforcements during 1954.

				L.A. Clinics	Medical Practi- tioners	Total
Diphtheria Immunisation:						
Primary	Under 1	....	....	32	40	72
	1— 4	....	....	49	51	100
	5—14	....	....	99	5	104
Booster	1— 4	....	....	40	27	67
	5—14	....	....	396	127	523
	15 and over	....	....	—	2	2
Combined Injection—Diphtheria and Whooping Cough:						
Primary	Under 1	....	....	318	104	422
	1— 4	....	....	136	110	246
	5—14	....	....	3	11	14
Booster	1— 4	....	....	2	8	10
	5—14	....	....	1	25	26
Whooping Cough only:						
Primary	Under 1	....	....	2	9	11
	1— 4	....	....	95	22	117
	5—14	....	....	1	1	2
Total immunised against Diphtheria	....			1,076	510	1,586
Total immunised against whooping cough	....			558	290	848

DIPHTHERIA IMMUNISATION — Children Immunised.

Year of Immunisation.

SECTION IV

TUBERCULOSIS

The number of primary notifications during 1954 was 91. The localisation of disease, ages and sexes were:—

Age Periods :	New Cases															Totals	
	0-	1-	2-	3-	4-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-		
Respiratory	M	1	—	—	—	—	1	1	2	6	8	5	3	2	2	2	33
	F	1	—	—	—	1	—	5	10	10	18	—	2	3	—	—	50
Non-Respiratory	M	—	—	—	—	2	—	1	—	—	—	—	—	—	—	—	3
	F	—	—	—	—	—	—	1	2	—	2	—	—	—	—	—	5

In addition to the primary notifications, three cases were discovered after death through the Local Registrars' Death Returns, and fifteen were transferred from other areas. The total new cases were, therefore, 109, of which 96 were respiratory and 13 non-respiratory. This is 20 more than the number notified in 1952.

Eleven of the new respiratory cases were contacts living with other members of their families who were already suffering from tuberculosis.

The numbers of Burnley patients on the Notification Register at the end of 1954 were: Respiratory 413; Non-Respiratory 113—Total 526.

The number of persons shown as suffering from respiratory tuberculosis is probably in excess of the actual number who in fact do suffer from the disease. Some persons may have been diagnosed in error and being perfectly well do not attend the chest clinic and cannot be traced; some may have moved out of the area or die of other diseases. A review of the register is now being undertaken, in co-operation with the chest physician, to ensure that the register shall contain only those cases still resident in the Borough who are actually suffering from the disease.

The number of notifications of non-respiratory tuberculosis received annually is now much less than pertained ten or more years ago. Only eight such cases were notified in 1954. The reduction is to a considerable extent associated with the increase in designated milk supplies, with less risk of infection from milk. There is reason to believe, however, that some case of non-respiratory tuberculosis are not being notified. Prior to the inception of the National Health Service in 1948, most cases of non-respiratory tuberculosis were seen by the tuberculosis officer at the Tuberculosis Dispensary, and he, as an officer employed in the local authority Public Health Service, ensured that these cases were notified by general practitioners. Now the chest physician sees only those cases of tuberculosis involving the respiratory system. Tuberculosis of glands, joints and bones are referred to general and orthopædic surgeons, and general practitioners are possibly not reminded, on confirmation of diagnosis, of their obligation to notify these cases.

Deaths.

The following table gives particulars of the site and age distribution of those who died.

Age Periods:	Deaths															Totals
	0-	1-	2-	3-	4-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	
Tuberculosis M of Respiratory System F	—	—	—	—	—	—	—	—	—	—	3	5	4	—	1	13
Tuberculosis M of Nervous System F	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
Tuberculosis M of Other Systems F	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1
Diseases M other than Tuberculosis F	—	—	—	—	—	—	—	—	—	—	—	1	—	3	1	5
	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	2

Of the 14 persons who died from respiratory tuberculosis during 1954, 2 died within twelve months after notification. One lived for one year, and 9 for more than three years after notification. Three of the persons were not notified prior to death.

The average age at death of persons suffering from respiratory tuberculosis was 53 years. The death rate from respiratory tuberculosis per 1,000 living was 0·17 and from non-respiratory tuberculosis 0·02.

After-Care and Prevention.

Visits by Health Visitors—

To homes of patients, under Tuberculosis Regulations	....	....	72
To homes of patients, for After-Care purposes	....	....	1,095
Extra nourishment (Milk) supplied (pints)	....	....	40,634
Paper Handkerchiefs issued	....	....	4,000
Bottles of Disinfectant supplied	....	....	74

B.C.G. Vaccination.

In my report for 1953, I referred to the approval given to a scheme for the protection against tuberculosis of school children towards the end of the year preceding their fourteenth birthday. Vaccination of this special group of school children was commenced in August, 1954 and continued until January 1955, during which time 568 children, whose parents gave consent, were tested. 421, who were found suitable, were vaccinated and final tests undertaken. Further details of this scheme are given in pages 14 and 15 of my report as Principal School Medical Officer, which is printed with this report. It is proposed to resume B.C.G. vaccination of a further group in the Autumn of 1955.

Vaccination by B.C.G. of infants born to tuberculous mothers and close contacts of tuberculous persons who are found to be suitable for vaccination is performed by the chest physician as part of the service for prevention of illness under Section 28 of the National Health Service Act, 1946.

Since commencing B.C.G. vaccination in late 1950 the numbers protected have increased as follows:—

1950—13 ; 1951—43 ; 1952—64 ; 1953—83 ; 1954—485.

Of the 64 contacts vaccinated in the year under review, 45 were children of tuberculous parents. 6 were brothers or sisters of patients, and the remainder lived in close contact with near relatives or friends.

RETURN FOR 1954.

Age	Under 1 year	CONTACTS						13 year old group of School children	Total
		1	2	3	4	5-9	10-14		
No. vaccinated	22	6	6	5	2	14	8	1	485

SECTION V

VENEREAL DISEASES

The following information is obtained from the statistical return for 1954, supplied by the consulting Venereologist for the Venereal Diseases Clinic at Victoria Hospital.

The total number of patients under treatment at the Venereal Diseases Centre during 1954 was 490, the total attendances which were made being 2,847. At the beginning of the year 267 patients were under treatment; 1 who was removed from the register in a previous year because of having failed to continue attendances for treatment, returned for treatment during the year; 222 patients attended for the first time (including 9 who were known to have received treatment at other centres or in the services).

Of the new patients, 50 (or 23.4%) were diagnosed as suffering from venereal diseases (24 syphilis, 26 gonorrhœa). The incidence of syphilis has shown a decrease, the total number of cases being 1 less than in 1953.

One hundred and seven of the new cases were Burnley residents, of whom 14 suffered from syphilis, 16 from gonorrhœa and 77 from conditions other than venereal.

The decrease in syphilis and gonorrhœa in Burnley, as elsewhere, has been very marked since the end of the last war. The incidence of syphilis is now less than one-fourth and of gonorrhœa less than one-fifth of that in the immediate post-war years. This is due mainly to more effective treatment with modern drugs, patients being quickly rendered non-infectious, and they are, therefore, less liable to infect others.

Statement showing the services rendered at the Treatment Centre during 1954, according to areas in which patients resided.

Number of new cases	Burnley	Lancs. County Council	West Riding County Council	Others	Total
Syphilis	14	9	1	-	24
Gonorrhœa	16	7	3	-	26
Conditions other than Venereal	77	75	9	2	163
TOTALS	107	91	13	2	213

SECTION VI

CARE OF MOTHERS AND YOUNG CHILDREN

Seven child welfare clinic sessions are held each week. Two of these are held on Monday and Friday afternoons in an annexe of the Maternity Hospital; three, on Tuesday, Wednesday and Thursday afternoons in church halls in Colne Road, Hammerton Street and Florence Street; two on Monday and Thursday afternoons in the Gannow Clinic premises.

All the treatment and specialist clinics for school children, e.g., minor ailments, eye, ear, nose and throat, orthopaedic and physiotherapy and orthoptic treatment are also available for children referred from infant welfare centres.

Twenty-seven children referred from the infant welfare centres made 129 attendances at the School Clinic for treatment of minor ailments. Particulars of those who attended the specialist clinics are given in my report as Principal School Medical Officer, which is printed with this report. Seventy-two pre-school children, making 836 attendances, were referred from the infant welfare centres and nurseries for artificial sunlight treatment.

The infants born during 1954 who attended infant welfare centres are equivalent to 59.4% of the live births registered during the year.

82% of the attendances at the infant welfare clinics were made by children in the first year of life. The total attendances were 14,604 which are 893 less than in the previous year.

The health visitors made 14,969 routine infant visits, of which 6,042 were to children under one year of age and 8,927 to children between the ages of one and five years. In addition, they made 357 ante-natal visits and 129 visits to cases of infectious disease, etc.

At no time during 1954 was the establishment of health visitors at full strength. Of the fourteen health visitors, four are employed mainly on school health work, one on tuberculosis and ten on care of mothers and young children, the care of the elderly, infectious diseases, domiciliary visiting, etc. Two vacancies existed throughout the year and although there was an improvement in the extent to which domiciliary supervision of mothers and infants and the elderly was undertaken the shortage of staff precluded the possibility of undertaking sufficient domiciliary visitations of toddlers. The establishment also includes two student health visitors, but only one student was recruited in the latter half of the year.

Dried Milk and Vitamin Supplement for Children and Expectant Mothers.

In 1954, the Ministry of Food ceased to be directly responsible for the distribution of welfare foods, and local health authorities took over this responsibility as part of the arrangements under Section 22 of the National Health Service Act, 1946.

The centres for the issue of these welfare foods for expectant and nursing mothers and young children immediately before the change over were 18, Nicholas Street (formerly the Food Office) and six infant welfare clinics.

From the figures supplied by the Ministry of Food it was evident that approximately three-quarters of these foods were distributed from 18, Nicholas Street. It was, therefore, decided to continue to use part of the Nicholas Street premises, which are owned by the local authority, as the main distribution centre, and two female clerks, previously employed by the Ministry of Food, were appointed by the local health authority, to be responsible, under the direction of the Medical Officer of Health, for the stocks and distribution of

dried milk, orange juice, cod liver oil and vitamin tablets from the main distribution point and to supervise generally the supply to and distribution of these welfare foods at clinics. Distribution from the six infant welfare centres was continued as formerly.

During the first few months after the local health authority assumed responsibility for the sale of welfare foods, the amounts sold were slightly in excess of those for a corresponding period prior to the change over. Since November, 1954, there has been a slight decrease in the amounts sold, particularly of dried milk.

The amounts sold between 28th June and 31st December 1954 are—

Distribution Centre	National Dried Milk	Cod Liver Oil	Vitamin A and D Tablets	Orange Juice
18, Nicholas Street Burnley	22,998	4,593	1,914	25,544
Infant Welfare Clinics	4,107	969	437	4,968
Combined Total Issues	27,105	5,562	2,351	30,512
Issues to: Institutions, Nursery Schools, Day Nurseries and Classes	138	354	40	2,544

In addition to the above, 936 lbs. of cod liver oil and malt, iron preparations and other vitamin products were supplied by the local health authority.

Births.

The number of births notified after adjustment for transferred notifications was 1,203. (1,171 live births and 32 still births). This is 30 less than in the previous year.

The 1,203 live and still births were notified by the following:—

Midwives	....	....	....	....	....	416
Doctors and Parents	....	....	....	....	....	2
Maternity and General Hospitals	....	....	....	....	....	785
						1203

Attendance at Birth.

Enquiries made by the health visitors showed that of the 1,516 confinements which occurred in the Borough—

None was attended by a doctor only.

71 were attended by both doctors and midwives.

345 were attended by midwives only.

1,097 occurred in the Bank Hall Maternity Hospital.

1 occurred in the General Hospital.

2 occurred in the Victoria Hospital.

Still Births.

32 still-births (after adjustment for transferred notifications) were notified in 1954 as compared with 40 in 1953. Enquiries elicited that the following conditions appeared to contribute to the still-births.

Toxaemia of pregnancy ....	....	....	....	....	....	3
Cardiac disease (Maternal)	....	....	....	....	....	1
Accidental haemorrhage ....	....	....	....	....	....	3
Diabetes Mellitus (Maternal)	....	....	....	....	....	1
Pressure on the foetal cord	....	....	....	....	....	6
Intra uterine death due to placental thrombosis	....	....	....	....	....	1
Erythroblastosis foetalis ....	....	....	....	....	....	2
Inattention at birth (born before arrival of midwife)	....	....	....	....	....	2
Anencephaly ....	....	....	....	....	....	4
Hydrocephaly ....	....	....	....	....	....	3
Intra-cranial haemorrhage	....	....	....	....	....	1
Multiple malformations ....	....	....	....	....	....	2
Cause unknown—macerated	....	....	....	....	....	1
Cause unknown—not macerated	....	....	....	....	....	2
						32

Ophthalmia Neonatorum.

No cases were notified during 1954.

Pemphigus Neonatorum.

No cases occurred during 1954.

Care of Premature Infants.

Sixty-six Burnley babies, representing 5·6% of the total born during the year, weighed $5\frac{1}{2}$ lbs. or less at birth. These were followed up by the health visitors immediately after the midwife ceased to attend or after discharge from hospital, and thereafter at frequent intervals.

Of these 66 premature infants, 13 were born at home and 53 in hospital. The 13 infants born prematurely at home represents 3% of the total domiciliary confinements in the Borough, whilst 53 born in hospital are equivalent to 6·7% of the Burnley infants born in hospitals. This higher rate in hospital births is due to the fact that expectant mothers in whom difficulties or complications are present or anticipated are advised to enter hospital for their confinements. Of the 13 infants born at home, 5 were transferred to hospital for special care and 3 of these survived beyond 28 days. The 8 who were nursed at home all survived beyond 28 days. Of the 53 born in hospital, 41 survived beyond 28 days.

The equipment maintained to provide for the needs of babies born prematurely at home was loaned to households where suitable provision was not available.

Although no special unit is available at any local hospital for the reception of babies born prematurely in their own homes, no difficulty has been experienced in having infants and their mothers admitted to Bank Hall Maternity Hospital when necessary.

Care of Illegitimate Children.

The Committee of Management of Bankfield House of Help continues to undertake, through their social worker, aftercare of unmarried mothers and illegitimate children, on behalf of the Local Authority. Twenty new cases were investigated. In 13 instances satisfactory arrangements were made for the babies to be kept by their mothers and the other 7 were helped in regard to adoption of their babies. One mother was advised and assisted in connection with an affiliation order.

Four unmarried expectant mothers were sent to moral welfare homes by the Local Authority, arrangements being made through the House of Help.

Maternal Mortality.

No Burnley woman died in consequence of pregnancy or childbirth.

Puerperal Pyrexia.

Only two cases of puerperal pyrexia were notified during the year. There must be a considerable number of recently confined women, particularly among those admitted to Bank Hall Maternity Hospital on account of complications of pregnancy, whose temperature rises to 100·4F., and it is obvious that these cases are not being notified by the medical staff of the Maternity Hospital despite reminders to do so which have been sent to them from time to time.

Day Nurseries.

No alteration has been made in the accommodation provided in the two day nurseries administered by the Local Authority Health. The average attendances throughout the year were 52 at Bank Hall Nursery (54 places) and 21 at Hargher Clough Nursery (26 places). In Bank Hall Nursery the majority of children were under three years of age, and in Hargher Clough Nursery under 2 years of age. Children between 3 and 5 years of age are accommodated in the Education Authority's ten nursery schools and five nursery classes. The total number on the rolls of these schools and classes at the end of the year was 639.

Regular medical supervision of all nursery children is undertaken.

Bank Hall Nursery, in conjunction with the Education Committee's nursery schools, continues to be a training nursery for students studying for examinations of the Nursery Nurse Examination Board.

Nurseries and Child Minders Regulation Act, 1948.

In Burnley there are no privately administered nurseries or nurseries established by employers for children of their employees. There are 3 registered child minders, caring for 9 children.

PARTICULARS OF WORK AT THE INFANT WELFARE CENTRES DURING THE YEAR ARE AS FOLLOWS:—

CENTRE	No. of Sessions	No. of First Attendances of Children under 1 year of age	No. of Children who attended born in 1954	No. of Children who attended born in 1953	Total No. of Children who attended	No. of Attendances of children who were under 1 year	No. of Attendances of children who were 1-2 yrs	No. of Attendances of children who were 2-5 yrs	Total No. of Attendances	Average Attendances per session	No. of Doctor's Consultations under 1 year	No. of Doctor's Consultations 1-5 years
Gannow	102	174	165	131	165	461	3203	384	504	4091	40	803
Colne Road	52	96	96	99	86	281	2195	349	210	2754	53	550
Mt. Pleasant	52	143	130	113	59	302	1710	263	110	2083	40	454
Florence St.	51	113	107	93	68	268	1850	157	129	2136	42	506
Bank Hall	101	217	198	142	117	457	2984	294	262	3540	35	854
TOTALS	358	743	696	578	495	1769	11942	1447	1215	14604	41	3167

Details of Work of Health Visitors during 1954.

MATERNITY AND CHILD WELFARE.

Visits to newly born infants	....	....	1,157
Re-visits 1st year	....	....	4,885
2nd ,"	....	....	2,471
3rd ,"	....	....	2,147
4th ,"	....	....	1,820
5th ,"	....	....	2,489
		
			14,969

Visits in connection with:—

Number of Sessions at the Infant Welfare Centres	....	....	....	358
Number of Attendances at the Centres by Health Visitors	....	....	....	1,048
Number of Attendances at the Nursery Schools or Classes by Health Visitors				53
Number of Sessions attended at the Chest Clinic (Day, 229; Evening, 51)				280

Visits to Tuberculosis Cases:—

Notifications under Tuberculosis Regulations	....	78
For After-Care purposes	....	1,163
	—	
Patients' Attendances at Chest Clinic	....	1,241
	....	3,489

SCHOOL MEDICAL SERVICE.

Number of days on which the School Clinic was open	....	....	306
Number of attendances at Clinic	....	....	28,732
Number of follow-up visits paid to School Children	....	....	7,924
Special visits to Schools for Cleanliness Inspection	....	....	233
Number of examinations made at Cleanliness Inspection	....	....	44,295

SECTION VII

MIDWIFERY SERVICE

Midwives' Act.

Twenty nine midwives notified their intention to practise midwifery during 1954.

They were employed as follows:—

In the Maternity Hospital	....	....	....	....	16
As whole-time domiciliary Municipal Midwives	....	....	....	....	10
In private Practice as Maternity Nurses	....	....	....	....	3

Domiciliary Midwifery.

The Local Health Authority has an establishment of ten midwives for domiciliary midwifery.

The three midwives who practice as private maternity nurses, generally resided in the homes of their patients for about four weeks after the confinement.

Fifty-nine visits were paid by the Supervisor to the midwives during the year. The Supervisor also interviewed midwives at the Health Office weekly. No midwife was suspended from practice.

A total of 1,516 confinements occurred in the Borough, including cases which came into the town from other areas for their confinements. Of these, 1,100 took place in hospitals, 409 were attended by the whole-time midwives employed by the authority on domiciliary midwifery (345 as midwives and 64 as maternity nurses); 7 by doctors and maternity nurses in private practice.

Of the confinements of women residents in Burnley, 775 took place in hospitals and 416 at home. The number of women who have their confinements in their own homes has steadily decreased during the last six years. Whereas in 1948, domiciliary confinements were 58% of the total, they decreased to 35% in 1954. This is in part due to the falling birth rate, but in the main due to the ample provision of maternity hospital beds in the area. For about twelve years prior to 1942, the birth rate of the Borough was very low, but in the period from 1943 to 1948 there was an increase and during this time additional beds were provided in an extension to Bank Hall Hospital. With a marked decrease in the birth rate during the last few years, maternity hospital beds would appear to be in excess of what is needed for those expectant mothers requiring to be admitted for clinical or social reasons, and few mothers who now apply are refused admission. Despite this ample provision, most mothers are discharged from Bank Hall Maternity Hospital on or about the tenth day after confinement. It is understood that this is because of reluctance of mothers to remain longer in hospital in the absence of any clinical considerations. Despite the greater cost of maintaining a maternity case in Bank Hall Hospital compared with the cost of providing a domiciliary midwifery service and the difficulty in recruiting sufficient nursing staff for the Maternity Hospital, no attempt appears to be made to limit admissions to those who require hospital care for clinical or social reasons. No requests are now received by me from the staff of the Maternity Hospital for reports by health visitors on the social and housing conditions of applicants for admission to the hospital.

Owing to the smaller number of confinements now being 'conducted in patients' own houses, consideration will have to be given in the near future to a reduction in the staff of domiciliary midwives employed by the local health authority.

During the year, 440 maternity outfits were provided free of charge to expectant mothers who required them for their confinements in their own homes.

Medical Aid Summoned by Midwives.

Twenty-nine records of sending for medical aid under Rule E. 12 of the Central Midwives' Board were received from the midwives in respect of domiciliary cases. Of these 21 were on account of complications or difficult conditions of the mothers and 5 of conditions in the new born infants.

Nursing Homes.

Only one Nursing Home is registered in the Borough. This home, which was opened in 1954 and which has accommodation for nine patients in three rooms, accepts only medical and chronic sick patients. It has no facilities for the treatment of surgical or maternity cases.

Ante-Natal and Post-Natal Care.

At present all general practitioners with one exception, who have accepted service under Part IV of the National Health Service Act have been included in the list of general practitioner obstetricians.

Practically all Burnley expectant mothers received ante-natal supervision either through the local health authority or hospital services.

ANTE-NATAL CLINIC.

No. of Sessions held per month.		No. of Women in attendance		Total No. of Attendances during the year.	
Medical Officer's Sessions	Midwives' Sessions	No. of women who attended during the year	No. of New Cases	Medical Officer's Sessions	Midwives' Sessions
8	4	599	484	1667	454

Attendances at Clinic for investigation of Rh. factor and Wasserman reaction of the blood of expectant mothers.

No. of Sessions held per month	No. of Attendances				
	MOTHERS		Fathers	Babies	Total
	Primary	Subsequent			
2	443	32	23	38	536

Only three women attended the clinic specifically for a post-natal examination by the Clinic Medical Officer, but all women are visited for post-natal purposes by the midwives and practically all are given a post-natal examination by their own general practitioners.

Figures supplied by the staff of Bank Hall Maternity Hospital Clinic show that 1,013 first attendances and 9,335 subsequent attendances were made there by women for ante-natal examinations and 847 for post-natal examinations. These figures, however, include women from the whole of the area covered by the Burnley group of hospitals. Separate figures for Burnley residents are not available.

SECTION VIII DENTAL SERVICE.

Report of Senior Dental Officer.

Six hundred and sixteen ante-natal patients and eight nursing mothers, who were referred from the Local Health Authority and Bank Hall Hospital ante-natal clinics, were requested to attend the dental clinic for inspection. Of these, only 345 (55%) attended.

Of the 345, only 87 were found to be dentally fit, and 258 (75%) required treatment. These 258 were given the option of receiving treatment through the Authority's scheme or attending their private dental practitioners. 126 (49%) accepted treatment at the clinic, the remaining 132 having decided to have treatment privately or were indifferent. Eight of those notified to attend for treatment failed to keep their appointments and 17, after having had some treatment, failed to continue until treatment was completed. 101, together with 12 carried over from 1953, had their treatment carried out or were awaiting appointments at the end of the year.

Artificial dentures were provided for 21 patients, 29 dentures being fitted. Two additions were made to dentures and one was repaired. In addition to the treatment figures shown in the table, 15 dressings and 10 local anaesthetics were given.

Twenty six children referred from infant welfare centres attended the dental clinic. Children under five years of age who attend nursery and infant schools are inspected and treated under the School Dental Service.

Eighty seven sessions were held during the year. The assistance given by the staff of Bank Hall Hospital ante-natal clinic and the municipal midwives is appreciated.

Most of those who attended and were found to be dentally fit were patients of private dental practitioners. It may be assumed that a proportion of those who did not report for examination were also patients under regular care from private practitioners, but it is obvious that there is a "hard core" who are not private patients and who do not attend for examination, who in all probability are in need of dental treatment. These are the mothers who, through fear or indifference, neglect regular dental treatment and seek relief only in emergencies. It is for this reason that a scheme is to be tried, in which the health visitors will visit these non-attenders, in an effort to persuade them to attend, at least for an examination. If they do so, it is hoped that a friendly chat may induce them to have any treatment of which they may be in need.

Numbers provided with dental care.

	Examined	Found to require treatment	Accepted treatment under Authy's Scheme	Treated	Made dentally fit
Expectant and Nursing Mothers	345	258	126	120	103
Children under 5 years of age	26	18	18	18	18

Forms of dental treatment provided.

	Scalings and Gum treatm't	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures provided		
							Full Upper or Lower	Partial Upper or Lower	Radiographs
Expectant and Nursing Mothers	83	125	—	—	248	63	17	12	1
Children under 5 years of age	—	4	2	—	30	16	—	—	—

SECTION IX DOMESTIC HELP SERVICE

Five hundred and fifty-two households were assisted during the year. Of the persons assisted, 87% were chronic sick, aged and infirm; 8% were persons suffering from other illnesses and 5% were maternity cases.

There continues to be a greater demand for assistance from the Home Help Service than can be met by the present staff of 46 whole-time and 5 part-time Home Helps. This demand comes mainly from elderly persons who by reason of senility and chronic illness are unable to undertake their own housework or shopping, and who have no relatives near at hand to help them. Although more helps could be employed, difficulty is experienced in recruiting the right type of person for this work.

No service of night attendants was provided in 1954, but as there was found to be occasional need for care of elderly people during the night, particularly those with incontinence, slight-mental confusion or defective eyesight, etc., a service is now provided, in 1955. Three attendants are available, on call.

It has also been decided to provide resident helps or wardens on those housing estates on which there are considerable numbers of elderly persons living in flats or bungalows and who have no relatives to assist them. The service will be tried in the first place for an experimental period on Bleak House Estate, when a house for the warden becomes available, and if it proves useful, it will be extended to other housing estates. The duties of the warden will be to visit the elderly people each morning and evening, and at other times during the day, as necessary, and give assistance with cleaning, cooking, lighting fires, shopping, cashing old age pensions, etc., for those who are temporary incapable of doing so for themselves, summoning medical aid when necessary, and generally acting as a liaison between the elderly infirm people and the Health Department.

The Domestic Help Organiser supervises the helps, investigates the needs and circumstances of applicants for assistance and recruits the personnel.

The total wages paid to the Domestic Help staff during the year ended 31st March, 1954 was £12,248, and the income from charges made for the service was only £915. This, however, is an increase of £233 over the previous year. The net expenditure on the service amounted to £12,305.

Type of Cases	Total cases attended		Cases Completed		Cases remaining on books at 31/12/54	
	No.	Per cent-age	No.	Per cent-age	No.	Per cent-age
Maternity	27	4·9	26	12·9	1	0·3
Tuberculosis	14	2·5	5	2·5	9	2·6
Illness of housewife	31	5·6	19	9·4	12	3·5
Chronic Sick	123	22·3	45	22·3	78	22·1
Aged and Infirm	357	64·7	107	52·9	250	71·5
	552	—	202	—	350	—

Periods for which Help was provided.

Less than one month	1-3 months		3-6 months		6-12 months		Over 12 months		
	No.	% age	No.	% age	No.	% age	No.	% age	
79	14·3	45	8·2	58	10·5	98	17·7	272	49·3

No. of patients receiving help at 1/1/54 .....	.....	.....	.....	.....	.....	304
No. of new patients during the year .....	.....	.....	.....	.....	.....	248
Total No. of patients who received help during the year .....	.....	.....	.....	.....	.....	552
No. of patients receiving help at 31/12/54 .....	.....	.....	.....	.....	.....	350
No. of Domestic Helps at 31/12/54—						
Whole-time....	.....	.....	.....	.....	.....	46
Part-time ....	.....	.....	.....	.....	.....	5
No. of visits by the Organiser to homes of patients in connection with the service .....	.....	.....	.....	.....	.....	972

"Meals on Wheels" Service.

The "Meals on Wheels" service is provided from the funds of the Burnley District Sick Poor Fund and the local health authority makes a contribution towards the cost of the service. (For particulars of the service see my report for 1953).

The administration of the meals scheme is undertaken by the staff of the Public Health Department on behalf of the trustees of the Fund.

Practically all the recipients were elderly persons, who because of enfeeblement, were unable to prepare midday meals for themselves and had no relatives available to do so for them.

Two course midday meals are provided on five days each week. The recipients receive these dinners on Monday, Wednesday and Friday of one week and on Tuesday and Thursday of the alternate week. Until September, 1954 the meals were cooked in the Authority's Municipal Kitchen, but when the kitchen was closed, arrangements were made for the meals to be provided by the Education Committee's School Meals Service. They are transported in a motor vehicle fitted with a hot oven, and each recipients' meal is delivered in an individual two-compartment container. The local W.V.S. assist in the distribution of the meals. Each meal costs at present 1/3d. and the recipients are expected to pay 9d. for it.

During 1954, between 30 and 40 meals were supplied daily. A total of 8,970 meals were provided at a cost of £645 16s. 9d. The income received from the recipients was £336 15s. 3d.

SECTION X

HOME NURSING SERVICE

One thousand, seven hundred and one patients were nursed. This entailed 43,602 home visits by the nurses. Although these nursing visits are somewhat less than in 1953, they indicate a very satisfactory volume of work despite the continued shortage of nursing staff. The establishment of nurses to deal adequately with the home nursing requirements of the Borough should be sixteen whole-time trained nurses. At no time since the local health authority took over the administration of the Home Nursing Service in 1948 has the establishment reached full strength, and at the end of 1954 the staff, in addition to the Superintendent and Assistant Superintendent, consisted of three whole-time Queen's Nurses, one whole-time and two part-time general trained nurses, four whole-time and two part-time assistant nurses. This is equivalent

to only ten whole-time nurses, and generally throughout the year four vacancies remained unfilled. Consequently the case load for each nurse was too great and only by conscientious and unremitting effort on the part of the staff was it possible to meet the demand for their services.

Although the nursing care of the elderly sick and infirm forms a major part of their work, the nurses are called upon to a considerable extent to give injections, such as insulin and antibiotics, for medical practitioners. No service of nurses for night duty is provided.

One nurse attended a refresher course during 1954.

The Local Health Authority is affiliated to the Queen's Institute of District Nursing.

SUMMARY.

Number of patients remaining on the Books, December 31st, 1953	....	324
Number of new patients during 1954	....	1,377
Total number of patients nursed	....	1,701
Total number of patients discharged or died	....	1,355
Number of patients remaining on the Books, December 31st, 1954	....	346
Number of nursing visits made during the year	....	43,602

METHOD OF DISCHARGE.

Number of patients convalescent	....	....	....	....	....	....	812
Number of patients died	....	....	....	....	....	....	291
Number of patients removed to Hospital	....	....	....	....	....	....	208
Number of patients removed from the Books for other causes	....	....	....	....	....	....	44

	Medical	Surgical	Infectious Diseases	Tuber-culosis	Material Complications	Others	Totals	Patients who were over 65 years of age	Children	Patients who had more than 24 visits during the year
Number of cases attended	1252	313	17	75	32	12	1701	891	34	359
Number of visits paid	33,158	7,674	169	2,103	394	104	43,602	26,304	299	31,101

The classification of the new cases includes:—

	Cases		Cases
Infective and parasitic diseases	12	Complications of pregnancy and the puerperium	30
Pulmonary Tuberculosis	55	Diseases of the skin and cellular tissue	72
Non-Pulmonary Tuberculosis	6	Diseases of the bones and joints	36
Neoplasms	62	Diseases of early infancy	5
Allergic, endocrine, metabolic and nutritional diseases	38	Senility and other conditions of old people	92
Diseases of the blood and blood forming organs	37	Accidents, poisonings and violence	49
Mental, psychoneurotic disorders	—	Gynaecological diseases (other than Genito-Urinary)	14
Diseases of Nervous System and Sense Organs	22	Enema (prior to X-ray examinations)	97
Diseases of Circulatory System	176	Enema (constipation, obstruction, etc.)	135
Diseases of Respiratory System (other than pneumonia)	92	Various post-operative conditions	95
Pneumonia	56	Cerebral Cases (not included above)	119
Diseases of Digestive System	17		
Diseases of the Genito-Urinary System	21		
Ear, Nose and Throat conditions	39		

The 1,377 New Cases were referred by:—

Doctors	....	....	....	....	....	....	1,223
Victoria Hospital	....	....	....	....	....	....	70
Manchester Royal Infirmary	....	....	....	....	....	....	1
Public Health Department	....	....	....	....	....	....	37
Applications by relatives	....	....	....	....	....	....	43
Social Welfare Department	....	....	....	....	....	....	3
							1,377

SECTION XI

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Care of the Aged and Sick and Infirm.

The health visitors devote considerable time in endeavouring to effect amelioration in the social circumstances of aged persons, many of whom are sick and infirm. For this purpose co-operation is maintained with the officers of the Social Services Department and the National Assistance Board, medical practitioners, the hospitals' almoner, the Council of Social Service, and other voluntary agencies. Interviews are arranged with relatives who may be able to assist those old people; home help and home nursing are arranged and midday meals provided where necessary.

In recent months meetings have been held between representatives of the local health and welfare authority and the religious denominations with a view to the establishment of a system of voluntary visiting and assistance to elderly people by members of the churches to which these elderly people belong, or in whose parishes they reside. These voluntary visitors would also act as liaison between elderly people needing assistance and the various statutory bodies providing welfare, health and other services.

During 1954, the health visitors co-operated fully with the Hospitals Bed Bureau in reporting on home circumstances of aged sick persons for whom admission to the wards for chronic sick in the General Hospital was sought by general practitioners and with practitioners in the home care of aged sick and infirm persons. Reports were completed for the information of the Bed Bureau respecting sixty-four men and ninety-one women.

In recent months a medical officer for geriatrics and the care of the chronic sick was appointed by the Hospital Management Committee. In co-operation with general practitioners, he makes domiciliary visits to elderly chronic patients, for selection of those in most need of hospital care. This has relieved the health visitors of some of the preliminary investigations which they formerly undertook, while close liaison is still maintained between the geriatrician and the Authority's staff. In recent months a better turn-over of beds in the chronic wards has enabled those in urgent need to be admitted with less delay than formerly.

Care and After-Care of Tuberculous Persons and Contacts.

The methods of undertaking the care and after-care of tuberculous persons, the tracing of contacts and ensuring that tuberculous persons are not employed under conditions which may endanger others were described in some detail in my report for 1953. No major alterations in procedure were made during 1954. The health visitor employed solely on tuberculosis after-care made 1163 domiciliary visits.

A general survey by Miniature Radiography Units, undertaken during the winter of 1953-54, was completed in April, 1954. The survey included, in addition to the County Borough, several neighbouring villages and persons working in Burnley but residing elsewhere. The figures, therefore, include a relatively small number who are not Burnley residents.

28,329 persons were X-rayed, including 2,283 children under 14 years of age. The mobility of one unit encouraged a greater number of firms to co-operate than when the 1948-49 survey was made. 410 persons were referred by general practitioners.

Fifty-one cases of active pulmonary tuberculosis were discovered, of whom only three were already on the tuberculosis registers. The rate of finding was very similar in males and females. The comparative over-all rates of active tuberculosis discovered per 1,000 examinees in the two surveys were 2.17 in 1948-49 and 1.8 in 1953-54, which gives an encouraging picture and is similar to the decrease now being experienced throughout the country in general. Whilst the age distribution of the cases discovered conformed to the usual pattern for females, the rate of finding in males in the age group 45-49 years was unusually low.

The work undertaken in the prevention of tuberculosis by B.C.G. vaccination of school children is described in my report as school medical officer.

Epilepsy.

At the end of 1954, seventeen epileptic children of school age were known to the School Health Service. Thirteen of these suffer from major and four from minor epilepsy. Nine of the major and the four suffering from minor epilepsy were able to attend ordinary day schools and are kept under frequent supervision. Four suffering from major epilepsy were in a residential special school. One of these is also blind. Six children under five years of age are under supervision by the Child Welfare Service, two being cases of major and four of minor epilepsy.

No reliable information is available of the number of adult epileptics in the community. Of those on the Disablement Register of the local office of the Ministry of Labour and National Service, only a few are unemployed. There would appear to be difficulty in finding employment for juvenile epileptics after they leave school, as employers with suitable employment available hesitate to engage young people with a history of fits.

The register of handicapped persons maintained by the Welfare Authority, which is as yet not comprehensive, contains the names of twenty one adult epileptics. Fourteen of these are in Colonies or Homes for epileptics, four are in hostels and three reside in their own homes.

Cerebral Palsy.

At the end of 1954, seven spastic children of school age were attending ordinary schools in the Borough, three were in residential special schools, one was in hospital, and two were awaiting admission to residential schools.

Two children under five years of age were being kept under supervision by the Child Welfare Service. Liaison with the Hospital Orthopædic Service is well maintained, to ensure suitable after-care supervision or special education for spastic children.

Two adult spastics, who are also mentally deficient, are under the supervision of the Mental Health Service. One of these is employed in the local Remploy Factory.

The register of handicapped persons maintained by the Welfare Authority contains the names of only two persons crippled by cerebral palsy, one of whom resides in a hostel.

Chronic Carriers of Infection.

A register is kept of persons known to be chronic carriers of infection. They are usually persons discharged from hospital while still excreting the infective organisms. Supervision is maintained to ensure that they do not engage in employment involving the handling of foodstuffs, and specimens of faeces for laboratory examination are obtained from them periodically. At the end of 1954, one dysentery carrier, and six carriers of salmonella typhi-murium were under surveillance.

Convalescent Treatment.

Thirty-nine persons received convalescent treatment during the year.

DETAILS OF PATIENTS WHO RECEIVED CONVALESCENT TREATMENT.

Name of Convalescent Home	Patients						Total patient weeks
	Adults		Children		Total		
	M.	F.	M.	F.			
Manchester and Salford District Provident & Family Welfare Society's Convalescent Home "West Hill" Southport	10	14	—	—	24		51
Blackburn and District Home, St. Annes-on-Sea	5	9	—	—	14		28
Convalescent Home of Our Lady of Lourdes, Boarbark Hall, Grange-over-Sands	—	1	—	—	1		2
	15	24	—	—	39		81

In addition 165 children selected through the School Health Service, each received two weeks' convalescence in the Thursby Convalescent Home, St.-Annes-on-Sea.

Provision of Nursing Equipment.

Nursing requisites are loaned to patients being nursed at home. Equipment available includes invalid chairs, crutches, air-beds, air-rings, bed pans, mattresses, blankets, bed cradles, etc. These articles are issued from the District Nurses' Home and a charge of 3d. or 6d. a week is made according to the type of article loaned.

NURSING REQUISITES LOANED DURING 1954.

Mackintosh Sheets	....	....	160	Mattress Protector	....	....	1
Bed Pans	....	....	195	Bed Tables	....	....	3
Air Rings	....	....	102	Inhalers	....	....	3
Urinals	....	....	48	Bed Blocks (set)	....	....	4
Wheel Chairs	....	....	36	Sputum Cups	....	....	2
Back Rests	....	....	54	Mattresses	....	....	4
Leg Rests	....	....	8	Pillows	....	....	7
Crutches (pairs)	....	....	3	Pillow Cases	....	....	3
Walk Aid	....	....	7	Bedsteads	....	....	1
Air-Beds	....	....	18	Bed Cradles	....	....	10
Feeding Cups	....	....	10	Ice Bag	....	....	1
Weighing Scales (prs.)	....	....	2	Commode	....	....	3
Sheets	....	....	3	Steam Kettle	....	....	2
Blankets	....	....	3				
				Total	....	694	

Health Education.

No special campaign of health education was undertaken during 1954, but talks to small groups of persons in various organisations were again given by members of the staff. Displays of material provided by the Central Council for Health Education were arranged. Pamphlets were distributed at clinics. Film strips were used to illustrate talks, especially those given by health visitors to mothers attending infant welfare centres.

National Assistance Act, 1948, Section 47.

It was not necessary to proceed under Section 47 of the National Assistance Act, 1951, as amended, for the compulsory removal to hospital or other place of persons suffering from chronic disease, or aged and infirm, who were not receiving proper care and attention. Several such persons were persuaded to accept suitable accommodation.

National Assistance Act, 1948, Part III.

Welfare of the Blind, Deaf or Dumb and other Permanently Handicapped Persons:—The Social Services Committee is responsible for carrying out the powers and duties of the Council with respect to residential accommodation for the aged and infirm and welfare services for blind, deaf or dumb and other handicapped persons under Part III and IV of the Act (except Section 41) and the Regulations made thereunder.

"Moorfields," which is that portion of the Burnley General Hospital which provides accommodation for non-sick persons under Part III of the National Assistance Act, has accommodation for 244 adults. This has been fully occupied during the year. "Healey Grange" has accommodation for 30 women. The adaptations to Healey Mount and St. John's Vicarage, for additional hostel accommodation, are not yet completed.

Deaf Persons.

The Social Services Committee and the North and East Lancashire Association for the Welfare of the Deaf co-operate to ensure adequate welfare arrangements for the deaf and dumb of the Borough. A Social Centre for the deaf is provided by the Association. The Authority makes a contribution to the Association, based on the number of deaf persons in the Borough.

Blind Persons.

The Register of the Blind contains the following:—

Number on Register at 1st January, 1954	....	....	241
Number of new cases during 1954	....	....	28
Re-certified	....	....	1
Transfer from other Authorities	....	....	4
Deaths during 1954	....	....	22
De-certified	....	....	2
Removals from Register during 1954	....	....	5
Number on Register at 31st December, 1954	....	....	245

The 245 persons on the Register of the Blind on 31/12/54 consisted of 89 men, 153 women and three children.

On the Register of Partially Sighted Persons there were 17 men and 38 women.

The Authority's Workshop for the Blind, employs the following blind persons:—

		Burnley		Lancs. County		Total
		Men	Women	Men	Women	
Basketry Dept.	Workers	6	—	6	—	12
	Trainees	2	—	—	—	2
Knitting Dept.	Workers	—	7	—	4	11
	Trainees	—	1	—	1	2
Totals		8	8	6	5	27

Twenty nine persons were examined by the Consultant Ophthalmic Surgeon during 1954, for the first time, in order to ascertain if they were suitable for inclusion in the Register of Blind Persons. The ages of the nine men averaged 71 years, and of the twenty women 78 years.

Of the fourteen persons recommended for surgical treatment, six have undergone operations, seven refused operation mainly because of their advanced ages and one died before operation could be performed. Of the eight recommended for optical treatment, one died.

EXAMINATIONS FOR ADMISSION TO REGISTER OF BLIND PERSONS AND TO REGISTER OF PARTIALLY SIGHTED PERSONS DURING 1954.

of Cases examined	Recommendations in para. 7 (c) of Form B.D. 8	Causes of Disability					No. of cases which on follow-up action have received treatment
		Cataract	Glaucoma	Retrorenal Fibroplasia	Other	Total Causes	
4	(a) No treatment	3	1	—	2	5	—
3	(b) Medical treatment	2	—	—	2	4	3
14	(c) Surgical treatment	13	—	—	2	15	6
8	(d) Optical treatment	5	—	—	5	11	7

SECTION XII

MENTAL HEALTH SERVICE.

The administration of the Mental Health Service is directly under the control of the Medical Officer of Health, and three Duly Authorised Officers (two male and one female), who are also mental health workers, are employed for statutory duties under the Lunacy and Mental Treatment Acts and for purposes of prevention and after-care of cases of mental illness and the supervision and care of mental defectives.

These officers work in close liaison with the Consultant Psychiatrist and Psychiatric Social Worker of the local hospitals, and frequently attend the out-patients psychiatric clinic, where their knowledge of and reports on the home circumstances and social background of the patients are of assistance to the psychiatrist. The Consultant Psychiatrist frequently requests the Authority's mental health officers to follow-up and provide after-care for both in-patients and out-patients after their discharge from hospital treatment. Informal meetings of the psychiatric medical and nursing staff and the mental health officers have been held from time to time. Liaison with general medical practitioners is good, and has resulted in many patients being admitted to hospital as voluntary patients.

Particular attention continues to be given to the after-care of patients discharged from mental hospitals. It is important that contact should be made immediately after the patients' return home. As these patients have usually been known to the mental health workers prior to their admission to hospital, visits are in most instances welcomed and the confidence of both the patients and their relatives is readily gained. The mental health workers have been very successful in assisting in the rehabilitation of patients and in their re-establishment in employment, as well as introducing them to appropriate statutory and voluntary agencies.

A large proportion of patients requiring in-patient treatment are now admitted as voluntary patients. In 1954, and also in 1953, 47% of admissions were arranged, under the Mental Treatment Act, 1930.

In my report for 1953, I referred to the problem of aged persons who are borderline cases of senile dementia. The number of senile cases to which the Authorised Officers' attention is drawn tends to increase, but co-operation with the Home Help, Health Visitors, Home Nursing and Social Welfare Services ensures domiciliary assistance to these aged persons.

The following examples illustrate the work done in after-care and rehabilitation.

CASE A—After discharge from a mental hospital, appointment for the patient arranged with the Disablement Rehabilitation Officer, and the patient found employment in the textile industry, where he is working well

CASE B—After discharge from a mental hospital, a formerly acutely suicidal patient was found temporary employment by the duly authorised officer, with a multiple firm. The patient settled into work well and is now on the permanent staff.

CASE C—After discharge from a mental hospital, a formerly acutely suicidal patient was found employment as a labourer, but domestic difficulties arose. These were resolved when employment as a Home Help in the Local Health Authority's service was obtained for the patient's wife.

CASE D—After discharge from a mental hospital, a homeless spinster, who had been previously employed as a housekeeper, but could not return to her former employer, was found domestic employment in a local hospital, where she is happy and a good worker.

CASE E—Two ex-patients of mental hospitals occupied adjacent flats. As there was endless strife between them, the authorised officer arranged with the Housing Manager for one to exchange flats with another person. Now that they are not in contact with each other, they have settled down happily.

CASE F—After discharge from a mental hospital, a formerly acutely suicidal patient was encouraged to take up mental deficiency nursing as a career. He is now a resident staff nurse, keenly interested in his work.

The supervision of mental defectives involves frequent domiciliary visits both to households where the care of low grade cases, such as imbeciles and idiots, prove a heavy burden on housewives and where other defectives are occasionally difficult to control. In this latter type, the visits of the mental health workers have a steady influence. Routine supervision is maintained over those who are on licence from hospitals and periodic reports on such cases are sent to hospitals. Here again assistance is given in finding suitable employment, in interviewing prospective employers and foremen under whom defectives will work, and by ensuring that the defectives' leisure is spent wisely.

Gannow Occupation Centre for mental defectives has accommodation for 40 persons. The majority of those in attendance are children or young persons. At the 31st December, 1954, 37 were in attendance, 20 being Burnley residents and 17 from the adjoining Lancs. County districts. The staff consists of a superintendent and two assistants.

MENTAL DEFICIENCY ACTS, 1913-1938.

	During 1954						Total as at 1st January, 1955.			
	Under age 16		Aged 16 and over				Under age 16		Aged 16 and over	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Particulars of cases reported during 1954										
(a) Cases at 31st December ascertained to be defectives "subject to be dealt with." Action taken on reports by—										
(i) Local Education Authorities on children—										
(1) While at school or liable to attend school	—	—	—	—	—	—	—	—	—	—
(2) On leaving special schools	—	—	—	—	—	—	—	—	—	—
(3) On leaving ordinary schools	—	—	—	—	—	—	—	—	—	—
(ii) Police or by Courts	—	—	—	—	—	—	—	—	—	—
(iii) Other Sources	—	—	2	5	—	—	—	—	—	—
(b) Cases reported but not regarded at 31st December as defectives "subject to be dealt with" on any ground	1	1	1	1	—	—	—	—	—	—
(c) Cases reported but not confirmed as defectives by the 31st December and thus excluded from (a) and (b)....	—	—	—	—	—	—	—	—	—	—
Total number of cases reported during the year	1	1	3	6	—	—	—	—	—	—
2. Disposal of Cases—										
(a) Of the cases ascertained to be defectives "subject to be dealt with," number—										
(i) Placed under Statutory Supervision	—	—	1	3	—	8	8	21	21	21
(ii) Placed under Guardianship*	—	—	—	—	—	—	—	—	—	—
(iii) Taken to "Place of Safety"	—	—	—	—	—	—	—	—	—	—
(iv) Admitted to Hospitals	—	—	1	2	—	3	3	66	53	53
(b) Of the cases not ascertained to be defectives "subject to be dealt with" number—										
(i) Placed under Voluntary Supervision	1	1	1	1	—	1	1	18	18	19
(ii) Action unnecessary	—	—	—	—	—	—	—	—	—	—
Total of Item 2	1	1	3	6	—	12	12	105	93	93
3. Classification of defectives in the Community on 1.1.55—										
(according to need at that date)										
(a) Cases included in item 2(a)(i) to (iii) above in need of hospital care and reported accordingly to the hospital authority :—										
(1) In urgent need of hospital care—										
(i) "cot and chair" cases	—	—	—	—	—	—	1	—	—	—
(ii) ambulant low grade cases	—	—	—	—	—	—	1	1	—	2
(iii) medium grade cases	—	—	—	—	—	—	—	—	—	—
(iv) high grade cases	—	—	—	—	—	—	—	—	—	—
(2) not in urgent need of hospital care										
(i) "cot and chair" cases	—	—	—	—	—	—	—	—	1	2
(ii) ambulant low grade cases	—	—	—	—	—	—	—	—	—	—
(iii) medium grade cases	—	—	—	—	—	—	—	—	—	—
(iv) high grade cases	—	—	—	—	—	—	—	—	—	—
Total of item 3 (a)	—	—	—	—	—	—	1	2	1	4

* Number of defectives under Guardianship on 1st January, 1955 who were dealt with under the provisions of Section 8 or 9:—

	Under age 18	Aged 18 and over
--	-----------------	---------------------

**3. Classification of defectives in the Community
on 1.1.55—continued—**

			M.	F.	M.	F.
(b) of the cases included in items 2(a)(i) and (ii) and 2(b)(i) overleaf, number considered suitable for—						
(i) occupation centre ....	....	....	8	7	4	3
(ii) industrial centre ....	....	....	—	—	4	1
(iii) home training ....	....	....	—	—	—	—
Total of item 3(b)	....	....	8	7	8	4

(c) of the cases included in 3(b) number receiving training on 1.1.55—

(i) in occupation centre ....	....	....	....	....	8	6	3	3
(ii) in industrial centre ....	....	....	....	....	—	—	—	—
(iii) at home ....	....	....	....	....	—	—	—	—
Total of item 3(c)	....	....	....	....	8	6	3	3

4. Number of Mental Defectives who were in Hospitals, under Community Care (Including Voluntary Supervision) or in "Places of Safety" on 1st January, 1954, who have ceased to be under any of these forms of care during 1954—

		M.	F.	Total
(a) Ceased to be under care ....	....	—	—	—
(b) Died, removed from area, or lost sight of ....	....	1	2	3
Total ....	....	1	2	3

5. Of the total number of mental defectives under Supervision or Guardianship or no longer under care—

(a) Number who have given birth to children while unmarried during 1954 NONE

Males	Females
-------	---------

(b) Number who have married during 1954 — —

No. of Reports to Mental Deficiency Institutions 86

No. of domiciliary visits made 877

	Burnley cases	County cases	Total cases
--	------------------	-----------------	----------------

Occupation Centre—

No. of persons on Register, 1st January, 1954	21	....	18	....	39
No. of new admissions	2	....	4	....	6
No. of discharges	3	....	5	....	8
No. remaining on Register, 31st Dec., 1954 ..	20	....	17	....	37
Average attendances during the year	16	....	15	....	31

Administration of Lunacy and Mental Treatment Acts during the year 1954.

		Other Auth's	Burnley	Total
1.	No. of admissions to Mental Hospitals—			
(a)	under Lunacy Act	94	85	179
(b)	under Mental Treatment Act	79	79	158
2.	No. of discharges from Mental Hospitals—			
(a)	under Lunacy Act	51	63	114
(b)	under Mental Treatment Act	74	80	154
3.	No. of patients died	8	11	19
4.	Total number of Burnley patients in Mental Hospitals at 31st December 1954			254
5.	No. of reports sent to Mental Hospitals			82
6.	No. of domiciliary visits			1214

SECTION XIII **AMBULANCE SERVICE**

During 1954 the ambulances made 6,916 journeys, carried 21,734 patients and covered 106,619 miles. The mileage was 4,716 less than in 1953 but the number of patients carried increased by 845.

The increases in patients carried and total mileage covered in the last six years are shown by the following figures:—

Year	Journeys	Patients	Total
		Carried	Mileage
1949	.... { not available }	12,138	91,424
1950	.... { available }	14,908	98,433
1951	.... 6,447	17,112	97,845
1952	.... 7,186	18,825	107,998
1953	.... 7,860	20,889	111,355
1954	.... 6,916	21,734	106,619

It will be noted that the number of patients carried has continued to increase steadily. This is due in the main to a greater turn-over of patients in the local hospitals and increased attendances for out-patient treatment, particularly for physiotherapy. There is still a heavy demand on the Ambulance service for the conveyance of patients to more distant hospitals, especially in Manchester and Liverpool, and more particularly in respect of patients requiring specialist opinion not available locally, such as from a neuro-surgical unit. Hospital staffs, and in particular the bed bureau for the local hospitals, have co-operated well in ensuring economy in the use of ambulances.

The arrangement for co-ordination with the local hospitals and augmentation of the Ambulance service in the event of a major disaster in this area was outlined in my report for 1953.

In February, 1955, the Ambulance Station was transferred from the temporary and unsuitable premises which it occupied since 1949, to the Authority's new Transport Depot in Aqueduct Street. Garage space, at present amounting to 2,000 square feet and an office and rest room are allocated for the exclusive use of the Ambulance service. A fully-equipped vehicle repair shop on the premises is available for repairs to ambulance vehicles, the repairs being undertaken by the staff of the Transport Department.

At the end of 1954 the fleet consisted of six ambulances and two sitting case cars. Both cars can carry eight sitting cases or four sitting cases and a stretcher case. These smaller and more economical vehicles are largely used for the transport of out-patients of hospitals clinics. All the ambulance vehicles with one exception have been purchased within the last six years. Delivery of an additional sitting case ambulance is expected in July, 1955.

The staff consists of one ambulance officer and twenty driver-attendants.

AMBULANCE STATISTICS FOR 1954.

Abortive and Service Journeys	Gas and Air, Oxygen, Blood etc. Journeys	Accident or Emergency		Others		Infectious Diseases		Totals		Mileage		
		Journeys	Patients Carried	Journeys	Patients Carried	Journeys	Patients Carried	Journeys	Patients Carried	Amb.	Car.	Total
414	702	1223	1259	4516	20403	61	72	6916	21734	75841	30778	106619

SECTION XIV

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply.

No changes were made during 1954 in the sources of supply, methods of treatment or distribution of water.

The consumption of water during the year was 1,236,210,714 gallons—approximately $104\frac{3}{4}$ million gallons more than in the previous year.

The supply of water is ample for the needs of the town. The rainfall, as measured at four different points on the gathering grounds showed an average of 62.94 inches in the year. The lowest amount measured was 60.91 inches and the highest 65.34 inches.

Thirty nine samples of water were submitted to chemical and 42 to bacteriological analyses. These were mainly samples taken from house taps at different parts of the town and represented supplies from the mixed supply of Heckenhurst reservoir and the direct supplies from Cant Clough and Swinden reservoirs. Throughout the greater part of the year, all samples were of excellent chemical quality and free from bacilli coli. For a short period in the fourth quarter of the year, following very heavy rainfall, occasional small numbers of bacilli coli type I were present in one source of supply.

Public Baths.

The three public baths contain both slipper baths and swimming baths. 34 samples of swimming baths' water were examined bacteriologically and chemically during the year. At all times, efficient chlorination maintained the baths waters at a high standard of chemical and bacteriological purity.

Public Cleansing.

Collection and disposal of Refuse.—No alterations have been made during 1954.

Amount of Refuse dealt with during the year ended 31st March, 1955.

Refuse Collected	....	....	....	Tons	Cwts.	Qrs.
	....	....	....	23,920	19	0

Disposal of Refuse:—

(a) By Salvage	....	....	....	4,044	12	1
(b) By Combustion	....	....	....	3,279	12	1
(c) Screened dust, clinker, etc., tipped	....	....	....	7,671	14	0
(d) By controlled tipping (Refuse)	....	....	....	9,366	19	0
				24,362	17	2

(e) Clinker tipped resulting from (b)	887	6	0
---------------------------------------	------	------	-----	---	---

Receptacles for Refuse in use during 1954.

No. of Premises	No. of Dustbins
30,137	31,025

General Sanitary Inspection.

Delay is still being experienced in having repairs effected owing to shortage of labour, but there is some improvement as compared with 1953.

Four thousand, eight hundred and ninety three complaints were received and dealt with.

	No.
Visits to Factories with Mechanical Power	190
,, Factories without Mechanical Power	3
,, Bakeries	560
,, Chip, Fish and Tripe Shops	223
,, Milk and Grocers' Shops	685
,, Ice Cream Manufactories and Shops	228
,, Fruiterers' and Fishmongers' premises	300
,, Butchers, Blood Boilers and Food Preparers	155
,, Cafes, Canteens and Restaurants	940
,, Marine Store and Offensive Trades	19
,, Stable Manure Pits	58
,, Premises where animals are kept	29
,, Common Lodging Houses	36
,, Canal Boats	3
,, Back-to-Back and Single Dwellings	564
,, Tents, Vans, etc.	58
,, Houses Let in Lodgings	58
,, Other Dwellings	11,170
,, Reported Dirty Dwellings	80
,, Old Property re Alterations	50
,, Premises where Nuisances exist	9,126
,, Alleged Overcrowded Houses	11
,, Colliery Tips	206
Draughts Tested	334
No. of Legal Notices Served	721
No. of Preliminary Notices sent out to abate Nuisance	2,156
No. of Verbal Notices Given	135
No. of Defects reported to Borough Surveyor	71
No. of Defects Reported to Cleansing Department	341
No. of Defects Reported to Highways Department	1,332
Interviews with Owners, Agents, etc., re Property	1,052
Interviews with Firemen	72
Inspections re Rats and Mice Infestations	278
Visits to School Premises	41
,, Theatres and Cinemas	25
,, Public Institutions	7
,, Under Shops Act	205
Defects found and dealt with	3,183
Defects remedied during the year	2,725
Defects of various kinds on the books of the Department at the end of the year	1,386

Legal Notices served during the Year.

PUBLIC HEALTH ACT, 1936—							
Section 39—Unsatisfactory Drainage	....	....	....	....	....	....	148
Section 45—Closets requiring repair	....	....	....	....	....	....	34
Section 75—Defective Dustbins	....	....	....	....	....	....	83
Section 93—General Nuisances (other defects of property)	....	....	....	....	....	....	183
BURNLEY CORPORATION ACT, 1925—							
Section 53—Defective Drains	....	....	....	....	....	....	273

SMOKE ABATEMENT.

During the year 225 observations of one half hour duration were taken of factory chimneys, and the results notified to the firms concerned.

Thirty-one letters were sent in accordance with the Council's resolution, which is to the effect that the Town Clerk shall communicate with those firms whose chimneys emit an amount of "moderate" smoke in excess of 6 minutes, or "black" smoke for more than one, but less than two, minutes.

Results of Observations.

	Black	Moderate	none	Light or
Total smoke in minutes	—	551.5	6198.5
Average smoke in minutes	—	2.45	27.55

The Smoke Abatement Advisory Committee for Burnley and District, formed in 1949, undertook further publicity for smoke abatement by means of lectures dealing with abatement of smoke from house chimneys, and by means of the press, etc.

PREMISES AND OCCUPATIONS CONTROLLED BY BYELAWS OR REGULATIONS.

Common Lodging Houses.

At the end of the year 7 houses were registered, the total accommodation being 231 males. 39 visits were made and 2 defects found.

Houses Let in Lodgings.

14 houses in Burnley were registered as Houses Let in Lodgings, which are divided in separate tenements, as follows:—

Tenements.	Occupants.
One-roomed 72	ADULTS—Males 88
Two-roomed 14	Females 61
Three-roomed 18	Infants under one year 6
Four-roomed 9	Children, aged 1 to 10 years 26
<u>113</u>	<u>181</u>
Visits paid ....	.... .... .... .... .... .... 58
Defects found ....	.... .... .... .... .... .... 10
Defects remedied ....	.... .... .... .... .... .... 7
Verbal and Informal Notices	.... .... .... .... .... .... 9

Offensive Trades.

The following is a list of the Offensive Trades carried on in Burnley:

Gut Scraper	....	....	....	....	....	....	....	1
Marine Stores	....	....	....	....	....	....	....	3
Tripe Boilers	....	....	....	....	....	....	....	1
Fellmonger	....	....	....	....	....	....	....	1
Tallow Melter	....	....	....	....	....	....	....	1

Inspections, 19. Defects found, 1. Verbal Notices, 1.

Rag, Flock and Other Filling Materials Act, 1951.

This Act, which became operative on the 1st November, 1951, requires the licensing of premises where rag flock is manufactured and the registration of premises where filling materials are used in the production of upholstered articles.

There is one manufacturer of rag flock in the Borough and thirteen premises where filling materials are used in the upholstery trade. These have all been licensed and registered.

During the year seven samples of flock were taken, two of which were slightly below standard; the manufacturers were warned.

Stable Middens.

No. of Middens, 28. Inspections, 58.

No. of times manure pits sprayed to destroy larvæ of flies, 102.

General Inspection of Working Class Dwellings.

Five hundred and sixty four visits were paid to back-to-back and single houses, 58 to houses let in lodgings, and 11,170 to other dwellings.

Dirty Houses.

Seventy-five houses were suspected of being dirty, and 52 were found to be so on inspection. Warnings were given on each occasion and it was not necessary to take legal action.

Sanitary Accommodation.

The total number and types of closets in the Borough at the end of 1954 are as follows:—

Clean Water Closets ....	....	....	....	....	....	20,318
Waste Water Closets	....	....	....	....	....	15,436
Latrines (78) with Closets	....	....	....	....	....	343
Privies	....	....	....	....	....	125

In only eight dwellinghouses (apart from farms) having clean water closets, do the closets drain to cesspools.

During the financial year assistance was given in connection with 68 conversions of waste-water closets.

The total number of closets not on the water-carriage system is 125 of which 117 are pails and 8 tanks. The Cleansing Department is responsible for the emptying of 92 of these.

Shops Act, 1950 (Section 38).

No. of Combined Shops and Dwellinghouses in Borough....	1,530
No. of Shops only	747
Total inspections of Shops	1,591
Inspections specifically for purposes of Section 38....	205

Offices.

The present establishment of Sanitary Inspectors is not such as to enable many inspections of offices to be undertaken in addition to the other duties of the Inspectors.

Camping Sites.

There are no seasonal camping sites within the Borough and no caravans are used as dwellings.

Inspection of Bakeries.

During the routine inspection of premises in which food is prepared 560 visits were made to bakehouses. The standard of cleanliness of these was found to be generally satisfactory.

DETAILS OF INSPECTION AND DEFECTS FOUND:—

Number on Register	....	....	....	....	....	153
Number of Inspections made	....	....	....	....	....	560
Verbal Notices	....	....	....	....	....	45
Informal (written) Notices	....	....	....	....	....	1
Number of Defects	....	....	....	....	....	47

Fish and Chip Shops.

No. of fish frying businesses at 31st December, 1954	....	....	....	....	....	73
No. of Inspections	....	....	....	....	....	223
Defects found	....	....	....	....	....	9
Informal Notices	....	....	....	....	....	—
Verbal Notices	....	....	....	....	....	9

Prevention of Damage by Pests Act, 1949.

Three rodent operatives work under the supervision of the Chief Sanitary Inspector, who is the official responsible for the administration of the Prevention of Damage by Pests Act, 1949.

The occupiers of premises are legally responsible for clearing their buildings of rats, but the rat catchers carry out the treatment on request, no charge being made for private dwellings, and actual time and cost of materials are charged in the case of business premises.

Applications for assistance received	....	....	....	....	....	394
Visits paid by Rodent Operatives to dwellinghouses	....	....	....	....	....	2,702
Visits paid by Rodent Operatives to business premises	....	....	....	....	....	3,810
Visits paid by Rodent Operatives to Local Authority premises	....	....	....	....	....	825
Special Inspections by Sanitary Inspectors	....	....	....	....	....	278

During the year the sewers received two maintenance treatments for destruction of rats. Two thousand six hundred and ninety manholes were baited and of these 419 showed pre-bait takes, all of which were complete takes. It was estimated that 2,095 rats were destroyed as a result of the two sewer treatments.

Co-operation has continued to be forthcoming from the officers of the Ministry of Agriculture, who have expressed their satisfaction at the manner in which the work has been carried out. The cost of the sewer treatments during the year was approximately £375, of which half is recoverable from the Ministry and half from the Sewers Department.

Sanitary Conditions of Schools.

All the schools in the Borough are supplied with water from the town's mains.

The Sanitary Inspectors made 41 visits to schools, mainly to inspect the sanitary conveniences.

It was not necessary to close any school in the Borough on account of Infectious Disease during 1954.

FACTORIES ACT, 1937 and 1948.

INSPECTIONS for the purpose of provisions as to health (including inspections made by Sanitary Inspectors) during 1954.

PREMISES (1)	Number on Register (2)	Number of Inspec- tions (3)	Number of Written Notices (4)	Number of Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities.....	247	563	4	—
(ii) Factories not included in (i) in which Section 7 is enforced by Local Authority.....	541	190	8	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises).....	—	—	—	—
TOTAL	788	753	12	—

2.—CASES in which DEFECTS were found.

PARTICULARS (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted. (6)
	Found (2)	Remedied (3)	Referred To H.M. Insp. (4)	By H.M. Insp. (5)	
Want of cleanliness (S.1)	27	22	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	44	34	—	19	—
(c) Not separate for sexes	—	—	—	—	—
Other offences (not incl. offences relating to outwork)	14	11	—	—	—
TOTAL	85	67	—	19	—

OUTWORK

(Sections 110 and 111).

NIL.

SECTION XV

HOUSING

Types of Dwellinghouse in the Borough at the end of 1954:—

Houses with through ventilation	....	....	....	....	27,209
Combined houses and shops	....	....	....	....	1,530
Houses without through ventilation:—					
(a) Back-to-back houses	....	....	....	....	507
(b) Single houses	....	....	....	....	120
(c) Single-roomed dwellings	....	....	....	....	5
(d) Cellar dwellings	....	....	....	....	6
Vans and Sheds	....	....	....	....	—
				Total	29,377

Houses Inspected and Recorded.

The total houses recorded under the Housing Consolidated Regulations up to the end of 1954 was.... 15,279

Houses with through ventilation:—

Total number of back-to-back houses, single houses, single roomed dwellings and cellar dwellings	....	....	....	638
Total number of back-to-back and single houses closed or demolished during 1954	....	....	....	9
Number of houses which were included in confirmed Orders under the pre-war programme but not yet demolished	....			3

Slum Clearance Programme.

A preliminary survey was completed in 1954 and this indicated that approximately 1,326 houses will have to be included in clearance schemes and in addition 34 dealt with as individual unfit houses.

Completion of this programme would efface all the back-to-back houses within the Borough.

It is not proposed to deal with any houses by way of "deferred demolition" under the Housing Repairs and Rents Act, 1954.

INDIVIDUAL UNFIT HOUSES.

(Action taken under the Public Health and Housing Acts).

I. Inspections.

(1) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts)	....	....	....	1,304
(2) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	....	....	....	29
(3) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	....	....	....	1,275

II. Remedy of Defects during the year without service of Formal Notices.

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers 941

III. Action under the Statutory Powers during the year:—

A.	Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936.	
(1)	Number of dwellings in respect of which notices were served requiring repairs Nil.	
(2)	Number of dwellinghouses which were rendered fit after service of formal notices:—	
(a)	By Owners Nil.	
(b)	By Local Authority in default of owners Nil.	
B.	Proceedings under the Public Health Acts:	
(1)	Number of dwellinghouses in respect of which notices were served requiring defects to be remedied	223
(2)	Number of dwellinghouses in which defects were remedied after service of formal notices—	
(a)	By Owners 185	
(b)	By Local Authority, in default of owners.... 10	
C.	Proceedings under Sections 11 and 13 of the Housing Act, 1936.	
(1)	Number of dwellinghouses in respect of which Demolition Orders were made 2	
(2)	Number of dwellinghouses demolished in pursuance of Demolition Orders 7	
	Number of persons displaced (under C(2)) 27	
(3)	Number of dwellinghouses in respect of which undertakings were accepted not to re-let for human habitation 5	
(4)	Number of dwellinghouses closed in pursuance of an undertaking given by the owners, and still in force. Number of persons displaced (under C(4)) 8 19	
D.	Proceedings under Section 12 of the Housing Act, 1936.	
(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made.... 2	
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit Nil.	
E.	Proceedings under Section 11 of the Housing Act, 1936, as amended by Section 10 of the Local Government (Miscellaneous Provisions) Act, 1953.	
(1)	Number of dwellinghouses in respect of which Closing Orders were made 29	
	Number of persons displaced (under E(1)) 70	
(2)	Number of dwellinghouses in respect of which Closing Orders were revoked and Demolition Orders made	
F.	Proceedings under Housing Act, 1949.	
(1)	Closing Orders made under Section 3(1) Nil.	
(2)	Demolition Orders determined and Closing Orders substituted under Section 3(2) Nil.	

Eradication of Bugs.

58 houses (3 being Council houses) were disinfested by insecticides, and the furniture, etc., of 7 families was disinfested by hydrocyanide gas prior to removal to new Council houses.

HOUSING STATISTICS.

Year ended 31st December, 1954.

Number of houses erected during the year:—

By Corporation ....	....	....	....	....	....	175
By private enterprise ....	....	....	....	....	....	10
With State assistance under the Housing Acts	....	....	....	....	....	—
Total number erected	....	....	....	....	....	<u>185</u>

SECTION XVI

INSPECTION AND SUPERVISION OF FOOD

Report by Veterinary Officer on Meat Inspection.

PUBLIC ABATTOIR.

The Council's proposals for modernisation of the abattoir to enable meat production to be carried out more economically and hygienically awaited the Report of the Interdepartmental Committee on Slaughterhouses.

In view of the Government's declared policy of moderate concentration of slaughterhouses, Burnley would appear to be well situated geographically for the siting of such a slaughterhouse. It might, therefore, be more desirable as a long term policy to erect a new abattoir building on a new site, which would not only allow for open lairage of stock during peak slaughtering periods in the early autumn but also for possible future extensions, rather than modernise old buildings or re-build on the present site. The existing abattoir is restricted in area, situated in close proximity to the town centre, and has no direct rail access.

The announcement by the Ministry of Food that meat would be de-controlled from July 1954 resulted in farmers withholding some livestock in the late spring and consequent reduced slaughtering during this period. For several weeks following de-control, there was an abnormal increase in the number of animals slaughtered to meet the sudden demand for meat supplies, but as prices became stabilised, more normal conditions again prevailed. A total of 39,551 animals passed through the abattoir during 1954, a reduction of 20% on the number dealt with during 1953, which was then an all-time record. This reduction was due partly to the abnormally slack period immediately prior to decontrol, and partly to some butchers, especially those in areas outside the Borough who under control were dependent for their supplies on the Burnley abattoir, returning to private slaughtering on their own account or obtaining their supplies from outside the area. Nevertheless, the number of animals slaughtered in the latter half of the year under decontrol was in excess of the number slaughtered during the same period in 1939. This would appear to be due to increased spending power of the public rather than to any general increase in trade. More local butchers now buy their supplies wholesale "on the hook" than in pre-war days, but lack of chill room facilities in the Burnley abattoir mitigates against any increase in throughput. Wholesalers are obliged to slaughter to order only, being unable to hold dressed carcases on hand for fear of decomposition, especially during the summer months.

Systematic inspection of all animals at the time of slaughter is carried out in accordance with Ministerial recommendations by whole-time meat inspectors, under the supervision of the veterinary officer. This is the ideal system of meat inspection and is one adopted by leading health authorities in this country and abroad.

The increase in the number of attested herds resulting from the national campaign for the eradication of bovine tuberculosis is again reflected in the reduction in the incidence of that disease encountered on the post-mortem examination of cattle slaughtered for food purposes. Whereas during the years prior to 1947, an average incidence of 50% was found in cattle slaughtered in the Burnley abattoir, this dropped to 25% in the year under review.

Cysticercus Bovis was found in the carcases of twenty-two beasts. The incidence of this disease, although still considerable, is less than it was in the years immediately following the war. This infection is almost invariably found in bullocks, rarely in cows, suggesting that hygienic conditions on feeding farms is far below that of dairy farms. The Carcases of affected animals are frozen for three weeks; this protects the consumer. Having regard to the different areas from which affected cattle are derived, sources of infection must be widespread. Consideration might well be given to the introduction of legislation to make it obligatory to bury human excreta several feet deep and to make it an offence to spread human excreta on pasture or other agricultural land.

Particulars of animals slaughtered at the Burnley Abattoirs during 1954, and the extent of diseased conditions found therein, are as follows:—

No. of animals slaughtered and examined	Animals Diseased						
	Tuberculosis			Diseases other than Tuberculosis			
	Whole carcasses condemned	Carcases of which some part or organ was condemned	Percentage of animals inspected	Whole carcasses condemned	Carcases of which some part or organ was condemned	Percentage of animals inspected	
Horses	48	—	—	2	5	14·5%	
Cattle excluding Cows							
Cows	2,832	5	208	7·52%	1	1,109	39·19%
Cows	2,090	26	507	25·50%	7	1,479	71·10%
Calves	792	2	—	0·25%	26	—	3·28%
Sheep & Lambs	26,929	—	—	—	11	2,108	7·87%
Pigs	6,860	8	197	2·96%	11	294	4·40%
TOTAL	39,551	41	912	2·41%	58	4,995	12·77%

In addition to the above number of animals slaughtered, 122 sides of beef, and 215 pigs from other depots, were examined.

The amount of meat found to be diseased and unfit for human consumption in the course of post-mortem examination of the animals referred to above during 1954 was:—

	Tons	Cwt.	Qrs.	Lbs.
On account of Tuberculosis ....	.... 19	17	2	18½
On account of other conditions ....	.... 17	13	1	11½
TOTAL	37	11	0	2

Food and Drugs Act, 1938, Sections 8 to 14.

Visits made to premises where food is prepared, stored or sold were as follows:—

Abattoirs	....	....	1,180	Wholesale Warehouses	....	20
Food Shops and Food preparing premises	....	....	313	School Canteen kitchens	....	21
Market	....	....	53	Dairies and Vehicles	....	168
				Other premises	....	67

Number of infringements found during the above visits was 179.

During the course of visits to the above premises, other than the Abattoir, the following foodstuffs were found to be unfit for human consumption and withdrawn from sale:—

Meat (fresh and cooked)	....	2,180 lbs.	Bacon	....	....	191 lbs.
Tinned Meats	....	1,296 lbs.	Dried Egg	....	....	101 lbs.
Tinned Fish	....	34 lbs.	Vegetables	....	....	100 lbs.
Tinned Milk	....	122 lbs.	Fish (Wet and Cured)	....	....	1,130 lbs.
Tinned and Bottled Fruits	....	407 lbs.	Fresh Fruit	....	....	380 lbs.
Tinned Soups, Vegs.	....	722 lbs.	Cereals and Confectionery	....	....	6 lbs.
Poultry	....	31 lbs.	Cheese	....	....	31 lbs.
Shell Fish	....	56 lbs.	Jam, Syrup, etc.	....	....	17 lbs.

Total Weight—3 tons, 0 cwts., 2 qrs., 27 lbs.

Public Health Meat Regulations, 1924.

Cases dealt with under these regulations numbered 21, the greater number being in connection with the production of distribution of meat.

Disease of Animals Act, 1950 (Duties of Local Authority).

Number of inspections carried out	....	....	93
Number of infringements found	....	....	29
Number of verbal notices	....	....	21
Number of notices served	....	....	17

Disease of Animals Act, 1950.

Sheep Scab Order, 1938. No special action under the Order was required during the year. The development and use of sheep dips which retain their insecticide properties for much longer periods have virtually eradicated this disease.

Swine Fever Order, 1938. Three suspected outbreaks were reported by pig owners, but subsequent investigation showed the disease to be present in only one case.

Anthrax Order, 1938. Two cattle and one pig slaughtered at the abattoir revealed on post-mortem pathological evidence suggestive of anthrax. Microscopical examination of tissues showed the conditions to be due in each case to other causes.

Foot and Mouth Disease Order, 1938. No action was necessary under this Order.

Fowl Pest Order, 1938. Two suspected outbreaks were investigated but in each case the deaths in stock were found to be due to other causes.

Tuberculosis Orders, 1938 and 1946. The continual increase in the number of attested herds has materially reduced the incidence of this disease in local dairy herds. The Veterinary Officer acting for the Ministry of Agriculture, arranged for the slaughter and post-mortem examination of one cow from the County area. In addition the dams of two calves found on post-mortem inspection at the abattoir to be affected with congenital tuberculosis, were traced and slaughtered.

MILK SUPPLY.

Incidence of Bovine Tuberculosis. The increase in the demand for and provision of tuberculin tested, pasteurised and sterilised milks, which are now about 97% of the total milk supplies of the Borough, has been a prime factor in reducing the incidence of bovine tuberculous infections. For the first time on record, no sample of milk examined biologically during 1954 contained bovine tubercle bacilli.

Twenty four samples of undesignated and accredited milk were found to be free from tubercle bacilli. However, until all the milk supplies are either heat treated or derived from tubercle-free attested herds, a risk of infection still remains for children who receive undesignated milk.

The designation "accredited" applied to milk was discontinued in October 1954. This grade often gave the public a false sense of security, as its name implied a superior type of milk, whereas in fact it gave no safeguard against tuberculous infection, but merely had a slightly better keeping quality.

All milk supplied to children in the Burnley schools is either pasteurised or tuberculin-tested pasteurised.

Examination of Milk for Cleanliness.

The improvement in bacteriological cleanliness of milk, to which I referred in previous reports, has been maintained. The general use on farms of chemical detergents and sterilants for the cleansing of milk vessels has no doubt contributed to this improvement.

All milk is now retailed in sealed bottles, thus ensuring cleaner milk being received by the housewife than was the case when it was delivered in hand cans filled from open churns in the street.

Two hundred and eighty four samples of milk were taken during the course of delivery during 1954 and submitted to either the méthylene blue reductase, phosphatase or turbidity tests, as applicable to the particular types of milk.

Details of these Samples are as follows:—

Types of Milk	Total samples taken	Unsatisfactory	
		No	%
Tuberculin Tested (Farm Bottled)	163	16	9.8
Tuberculin Tested Pasteurised	21	nil	—
Pasteurised....	50	2	4.0
Sterilised	3	nil	—
Accredited (Farm Bottled) (to 30th Sept., 1954)	10	4	40.0
Undesignated	37	4	10.8
TOTAL	284	26	9.1

Milk and Dairies Regulations, 1949.

No. of distributors registered for sale of milk	....	....	406
No. of premises inspected	....	....	271
No. of infringements found	....	....	27

Of the 406 registered distributors of milk, only two now occupy dairy premises. All the others obtain their supplies pre-bottled. No loose milk is now retailed, all milk being supplied to consumers in bottles.

Milk (Special Designation) (Raw Milk) Regulations, 1949.

Dealers' Licences for Tuberculin Tested Milk (including Supplementary)	18
--	------	------	------	------	------	----

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.

Pasteurisers' Licences	....	....	....	....	....	1
Dealers' Licences for Pasteurised Milk	....	....	....	....	....	16
Dealers' Licences for Sterilised Milk	....	....	....	....	....	394

Pet Animals Act, 1951.

This Act, which came into operation on 1st April, 1952, regulates the sale of pet animals, and no person shall keep a pet shop except under the authority of a licence granted by the Local Authority. Eight licences were renewed and one new licence was granted during the year.

Conditions are specified in the licences for securing satisfactory accommodation, cleanliness, precautions against spread of disease, fire precautions, etc. Inspection of these premises is carried out by the Veterinary Officer.

Ice Cream.**Bacteriological Examination.**

Sixty eight samples of ice cream were submitted for bacteriological examination during the year, and the following results were returned:—

Grade	Methylene Blue Test (Provisional Grades)			
	1	2	3	4
No. of Samples in each Grade	41	10	6	11

On each occasion in which the methylene blue test showed that a sufficiently good bacteriological standard had not been attained by firms manufacturing ice cream locally, investigation was made and advice given at the place of manufacture. Firms manufacturing outside Burnley were informed of unsatisfactory laboratory reports and notification was also sent to the local authorities in whose areas the ice cream was manufactured, so that similar investigations could be made. In all instances in which samples were reported to be of grades 3 or 4, further samples were taken, after the necessary investigations were made, to ensure that improvement in the standard had been effected.

There are five local firms manufacturing ice cream and all use the Hot Mix Method.

Food Premises.

- (1) The **Types of Food Premises** in the Borough are:—

Bakeries	....	....	....	....	....	153
Grocers	....	....	....	....	....	389
Greengrocers	....	....	....	....	....	38
Butchers and Meat Traders	....	....	....	....	....	122
Fishmongers	....	....	....	....	....	24
Cooked Meat Manufacturers	....	....	....	....	....	32
Fish and Chip Shops	....	....	....	....	....	74
Canteens	....	....	....	....	....	44
Cafes and Restaurants	....	....	....	....	....	121
Manufacturers of Ice Cream	....	....	....	....	....	5
Retailers of Ice Cream (including the 5 manufacturers)	....	....	....	....	....	240
					Total	1,242

- (2) **Number of Food Premises registered under Section 14 of the Food and Drugs Act, 1938** (included in (1) above).

Butchers manufacturing sausages and/or potted meat....	83
Cooked Meat manufacturers	....
Shopkeepers who also prepare small quantities of cooked meats	....
Retailers and Manufacturers of ice cream	....
	Total
	364

- (3) **Number of inspections of Registered Food Premises.**

Meat and other Cooked Foods	....	....	....	971
Ice Cream	....	....	....	228
			Total	1,199

- (4) **Premises Registered under Milk and Dairies Regulations, 1949, and inspections made.**

See page 70.

Method of disposal of Condemned Food.

- (1) All unsound meat, offal, etc., from the Abattoirs was disposed of to a firm of manufacturers of fertilisers, after staining.
- (2) Tinned Foods were destroyed in the Authority's refuse destructor.
- (3) Cereals and similar foods were disposed of for animal feeding purposes, under the supervision of the Authority's officers.
For details of foodstuffs condemned see page 68.

It was not necessary to make a special examination of any large stock or consignment of food during the year.

Food Hygiene.

Efforts to improve the hygienic conditions of food preparing premises and effect cleaner production and handling of food have continued throughout the year. Practically all butchers' shops and all cooked meat premises are now fitted with sinks for the cleansing of utensils and separate hand washing basins, each provided with constant supplies of hot and cold water. Endeavours are being made to have similar facilities provided in premises where other foods are prepared or sold.

Although hygienic standards in premises where cooked and preserved meats are prepared are generally satisfactory, it is found that many small general shops, often one-man businesses in side streets, which sell cooked meats purchased mainly from local manufacturers and whole-salers, are stored and displayed under conditions which do not ensure protection against contamination. There would be great advantage in legislation to require such premises to be registered by local authorities on similar lines to shops retailing milk and ice-cream. This would facilitate ascertainment, inspection and enforcement of hygienic standards of storage and handling.

The supervision of catering establishments, canteens and hotel kitchens, to which the food hygiene inspector gave special attention, has ensured the maintenance of improved hygienic conditions. The personnel of food preparing and catering establishments are reminded from time to time of the standard to which they are expected to conform.

SAMPLES TAKEN DURING 1954.

Analysis of Samples of Foods and Drugs.

Nature of Sample	Formal		Informal		Total	
	Genuine	Adult-erated	Genuine	Adult-erated	Genuine	Adult-erated
Baked Beans	—	—	2	2	2	2
Butter	—	—	1	—	1	—
Buttered Teacake	—	—	—	1	—	1
Cheese Spread	—	—	1	—	1	—
Coffee and Chicory Essence	2	—	—	—	2	—
Christmas Pudding	—	—	1	—	1	—
Cough Candy	—	—	—	1	—	1
Cough Syrup	—	—	1	—	1	—
Currants	1	—	—	—	1	—
Edible Oil	—	—	1	—	1	—
Fruit (tinned)	—	—	2	—	2	—
Ice Cream	—	—	57	8	57	8
Malt Vinegar	—	—	1	—	1	—
Margarine	—	—	—	1	—	1
Marzipan	—	—	1	—	1	—
Milk	136	3	62	3	198	6
Milk (Dried)	—	—	2	—	2	—
Mincemeat	—	—	1	—	1	—
Mineral Waters and Cordials	—	—	33	4	33	4
Meringue	—	—	—	1	—	1
Non Brewed Condiment	—	—	2	1	2	1
Neatsfoot Oil	—	—	1	—	1	—
Peas (Tinned)	—	—	3	—	3	—
Piccalilli	—	—	2	—	2	—
Potato Crisps	—	—	1	—	1	—
Red Pepper Sauce	—	—	1	—	1	—
Sausage (Beef)	1	—	14	1	15	1
Sausage (Pork)	—	—	6	4	6	4
Sausage (Salami)	—	—	1	—	1	—
Soup	—	—	4	—	4	—
Salmon Paste	—	3	1	3	1	6
Fish Paste	1	—	1	—	2	—
Fish Cakes	—	1	2	1	2	2
Teething Powders	—	—	1	1	1	1
Toffees and Sweets	—	—	4	1	4	1
Tea	—	—	1	—	1	—
Whisky and other Spirits	5	—	—	—	5	—
	146	7	211	33	357	40

Particulars of FORMAL Samples Adulterated or Below Standard.

SAMPLES	RESULT	ACTION TAKEN
Milk (3 samples)	Slight deficiency of fat	Producers warned.
Salmon Paste (2 samples)	Faulty label	Manufacturers label amended.
Salmon Paste	Slight deficiency of salmon content .	Manufacturers warned.
Fish Cake	Deficiency of fish content	Manufacturer warned. Further samples found to be genuine.

Particulars of INFORMAL Samples Adulterated or Below Standard.

SAMPLES	RESULT	ACTION TAKEN
Cough Candy	Faulty Label	Manufacturers amended label.
Orange Drink	Excess of Saccharin	Further samples taken ; found to be genuine.
Baked Beans (2 samples)	Slight deficiency of solids.....	Manufacturer warned.
Teething Powders	Faulty Label	Manufacturers amended label.
Fish Cakes	Deficient of Fish Content	Manufacturers warned Further samples found to be genuine.
Ice Cream (3 samples of same manufacturer)	Slight deficiency of fat and non-fatty solids	Manufacturer warned.
Orange Crush	Faulty label	Manufacturers amended label.
Buttered Tea-cake	Found to contain slight deposit of mineral oil	Manufacturer warned.

Particulars of INFORMAL Samples Adulterated or Below Standard.—continued.

SAMPLE	RESULT	ACTION TAKEN
Ice Cream	Slight deficiency of fat and non fatty solids	Manufacturer warned.
Ice Cream..... (4 samples)	Slight deficiency of fat	Manufacturer warned.
Morning Orange	Faulty label	Manufacturers amended label.
Non-Brewed Condiment	Deficiency of Acetic Acid	Manufacturers warned ; further samples found to be genuine.
Sausages (Pork)	Slight deficiency of Meat	Manufacturers warned.
(4 samples)		
Sausages (Pork)	Faulty label	Label discontinued.
Sausages (Beef)	Slight deficiency of Meat	Manufacturers warned.
Milk (3 samples)	Small amount of extraneous water and slight deficiency of fat	Vendors warned ; further samples found to be genuine.
Meringue	Cream filling sour	Manufacturer warned.
Salmon Paste	Faulty label	Manufacturers amended label.
(2 samples)		
Salmon Paste	Slight deficiency of salmon	Manufacturer warned.
Green Ginger Cordial.	Deficient of sugar and faulty label	Manufacturer warned ; Label to be amended.
Rum and Butter	Deficient of butter fat	Manufacturer warned.
Toffee		Label to be amended.

Police Court Proceedings.

It was not found necessary to take any Police Court proceedings under the Food and Drugs Acts. Two slaughtermen were prosecuted and fined for slaughtering in the abattoir sheep not previously stunned by a humane killer and for not being the holders of current licences in accordance with the provisions of the Slaughter of Animals Act, 1933.

SECTION XVII

MISCELLANEOUS.

Medical Examinations.

Particulars of medical examinations carried out during 1954:—

PURPOSE	No. of Exams
Retirement	12
Workmen's Compensation Act	22
Fitness for employment (Superannuation)	311
Road Traffic Act	149
Fitness to Work	21
School Meals Service	38
Accidents	7
Others	59
Total	619

Investigation of Atmospheric Pollution.

The following are average monthly figures of pollution of the atmosphere at three sites in the Borough.

Detail	Site of Gauge		
	Gannow I.W.C.	Bank Hall Hosp.	Marsden Hosp.
	Tons per Sq. mile	Tons per Sq. mile	Tons per Sq. mile
Total undissolved matter	10.11	18.78	8.78
Total dissolved matter	10.12	8.96	8.58
Total deposit	20.23	27.74	17.36
Sulphate as SO_4^{2-}	3.40	3.48	2.56
Chlorine as Cl^-	2.59	1.69	1.78

The Weather of 1954 compared with 1953.

METEOROLOGICAL OBSERVATIONS AT QUEEN'S PARK.

	Bright Sunshine			Rainfall			Temperatures				No. of days of Ground Frost	Mean Relative Humidity
	Total Amount in Hrs.	No. of days of sun	Highest amount in 24 hrs.	Total Fall in Ins	No. of days of rain	Highest amount in 24 hrs.	Mean in Shade	Mean Range	Mean Earth 1 Foot	Mean Earth 4 Feet		
Average 40 Years	1074.1	269	15.3 hrs. on 7/6/21 & 29/6/21	42.31	210	2.420 ins. (9/10/41)	47.2°	12.4°	47.7°	48.8°	112	82.2%
1953	1122.5	258	13.4 hrs. (29 June)	37.5	176	1.343 ins. (28 Mar)	48.5°	12.4°	48.9°	48.6°	107	81.6%
1954	835.0	246	12.9 hrs. (3 June)	55.73	221	2.413 ins. (20 Jan)	46.6°	11.5°	47.9°	48.3°	105	82.6%

MEAN METEOROLOGICAL READINGS, RECORDED AT QUEEN'S PARK, 1954.

LAT.: $53^{\circ} 47' 30$ N.

LONG.: $2^{\circ} 14' 30''$ W.

Barometer Cistern 458 feet above Mean Sea Level

THERMOMETERS.

Year	Mbrs.	IN SCREEN				IN GROUND				Most in a day				No. of Days of				
		Mean Air Pressure at Mean Sea Level	Mean Max.	Mean Min.	Mean Temp.	Absolute Extremes of Temperature	Mean Min. on Grass	Mean 1 foot	Mean 4 feet	Date	Lowest H _g best	Date	Total Fall	No. of days	No. of days of Sun	Daily Mean	Day of month	N. N.E. E. S. S.W. W. N.W. C'lm
1954	30.130	40.4°	30.8°	35.6°	53°	14/1/54	24.8°	38.7°	48.8°	8/1/54	112.9	61.3	20/1/54	11	11.1	0.35	2.4	30/1/54 1
Jan. ...	1020.3	40.4°	30.8°	35.6°	53°	14/1/54	24.8°	38.7°	48.8°	8/1/54	112.9	61.3	20/1/54	11	11.1	0.35	2.4	30/1/54 1
Feb. ...	1010.7	29.848	39.1°	29.0°	34.0°	51°	22/2/54	10°	2/2/54	23.3°	36.1°	40.4°	90.9%	16	87.3	18.0	9/2/54	15
March ...	1008.0	29.768	45.8°	35.0°	40.4°	56°	21/3/54	6°	1/3/54	30.0°	39.5°	40.7°	84.5%	14	74.1	15.4	6/3/54	24
April ...	1024.9	30.265	52.2°	35.8°	44.0°	58°	15/4/54	28°	6/4/54	27.0°	44.3°	43.6°	72.2%	6	18.8	4.6	3/4/54	26
May ...	1015.3	29.982	58.0°	44.0°	51.0°	72°	27/5/54	34°	8/5/54	39.8°	50.4°	47.2°	71.6%	14	82.1	33.4	28/5/54	27
June ...	1013.1	29.919	60.5°	48.9°	54.7°	69°	3/6/54	43°	13/6/54	44.7°	56.5°	52.2°	78.0%	14	57.1	15.5	9/6/54	23
July ...	1010.2	29.833	60.4°	49.6°	55.0°	70°	9/7/54	39°	7/7/54	44.1°	57.8°	54.2°	80.9%	19	124.3	25.0	23/7/54	27
Aug. ...	1010.2	29.833	61.6°	50.7°	56.1°	72°	31/8/54	41°	1/8/54	45.8°	56.9°	55.2°	85.0%	25	178.7	28.5	20/8/54	26
Sept. ...	1009.2	29.803	60.0°	46.6°	53.3°	79°	1/9/54	36°	23/9/54	39.4°	55.2°	55.1°	80.2%	25	140.9	25.9	12/9/54	30
Oct. ...	1010.4	29.839	56.9°	47.1°	52.0°	67°	3/10/54	28°	26/10/54	40.4°	52.2°	52.9°	86.9%	27	192.5	29.7	23/10/54	20
Nov. ...	1008.3	29.776	48.1°	37.4°	42.7°	57°	11/11/54	28°	17/11/54	31.3°	45.0°	49.1°	85.5%	25	183.5	27.4	26/11/54	13
Dec. ...	1010.3	29.836	46.2°	36.8°	41.5°	56°	2/12/54	28°	7/12/54	33.2°	42.8°	45.7°	87.4%	24	163.4	17.0	8/12/54	4
Whole Year ...	1012.5	29.902	52.4°	40.9°	46.6°	79°	1/9/54	6°	1/3/54	35.3°	47.9°	48.3°	82.6%	221	1415.6	61.3	20/1/54	246
																	3/6/54 10	
																	29/27 48 33 77 99 32 10	

NUMBER OF DAYS OF :

SNOW OR SLEET	SNOW LYING (at obs. hour)	HAIL	THUNDER HEARD	FOG (at obs. hour)	GROUND FROST	GALE
22	17	11	8	18	.	105



COUNTY BOROUGH OF BURNLEY.

Local Education Authority.

MEDICAL OFFICER'S
REPORT

1954

D. C. LAMONT, M.B., Ch.B., D.P.H.
SCHOOL MEDICAL OFFICER.

THE EDUCATION COMMITTEE.

FOR THE MUNICIPAL YEAR 1954-55.

IS CONSTITUTED AS FOLLOWS:—

HIS WORSHIP THE MAYOR (Mr. Alderman J. Herbert, J.P.)

*MRS. ALDERMAN M. A. BATTLE, J.P.
MISS ALDERMAN A. PROCTOR.
MR. ALDERMAN R. BUSHBY.
*ALDERMAN G. HALE, J.P. (Chairman).
*ALDERMAN T. MAXFIELD, J.P.
*ALDERMAN E. SANDY (Vice-Chairman).
*MRS. COUNCILLOR A. HEAP, M.B.E.
*MISS COUNCILLOR E. UTLEY.
*COUNCILLOR G. BLACKSTON.
COUNCILLOR E. BROOKS, J.P.
*COUNCILLOR W. HEAP.
*COUNCILLOR T. HOLGATE.
*COUNCILLOR G. HOLLINRAKE.
*COUNCILLOR J. LORD.
COUNCILLOR G. W. LORD.
COUNCILLOR J. T. McDONALD.
*COUNCILLOR J. L. MERCER.
COUNCILLOR W. MILLS.
COUNCILLOR S. TAYLOR.

CO-OPTED MEMBERS:

*THE REV. J. KEATON.
THE REV. L. W. MORGAN, B.A.
MISS D. N. CHEW, B.A., J.P.

*Member of the Special Schools and Services Sub-Committee.

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PUBLIC HEALTH DEPARTMENT,
BURNLEY.

20th June, 1955.

TO THE CHAIRMAN AND MEMBERS OF
THE EDUCATION COMMITTEE.

LADIES AND GENTLEMEN,

I have the honour to present to you my report on the work accomplished by the School Health Service during the year 1954. This is the twenty-fourth report which I have placed before you and the forty-seventh in the series.

The report, although largely statistical, indicates a year of steady pains-taking work by the staff of the School Health Service. Medical inspection of the appropriate age groups was undertaken in all the schools, and the dental surgeons were able to inspect the teeth of 12,628 of the 13,344 pupils on the school rolls.

The general physical condition of the children as a whole continues to be satisfactory, and fortunately there was comparatively little infectious disease, and no major epidemic of any one disease. It is pleasing to be able to report that no cases of acute anterior poliomyelitis (infantile paralysis) occurred and diphtheria has been almost entirely absent for five years.

In the autumn of 1954, an important advance was made when a scheme was inaugurated for the protection of children against tuberculosis by B.C.G. vaccination immediately prior to their fourteenth birthday. The response of parents to the offer to test children of this special age group and, if necessary, give the protective inoculations has been very gratifying.

This year's report includes an account by the senior orthoptist of the functions of the orthoptic section of the School Eye Service. This orthoptic service, which is an integral part of the arrangements for the care of children's eye-sight, is little known, but important.

A slightly disturbing feature mentioned elsewhere in the report is the tendency recently noted for the average weights in some of the age groups to show a slight reduction.

A realisation of the importance of oral hygiene and a sound and healthy set of teeth appears to be lacking among many children and their parents. The incidence of dental caries has always been high in Burnley children; there is no evidence of improvement despite the many years during which dental inspection and treatment have been available, and despite the efforts to educate both children and parents in the value of early and regular dental care. Half the children inspected by the dental surgeons were found to require treatment, but only about half of those who should have had dental attention took advantage of the treatment facilities in the Dental Clinic.

I would like to express my appreciation of the courtesy accorded me by members of the Education Committee and of the assistance of the Director of Education and his staff, and of the staff of the School Health Service.

I have the honour to be,
Ladies and Gentlemen,
Your obedient servant,
D. C. LAMONT,
Principal School Medical Officer.

General Information.

SCHOOLS.

In December, 1954, the total number of pupils enrolled in the Schools was 285 more than in December, 1953.

At the end of 1954, the numbers of children on the rolls were as follows:— Nurseries, 639; Infants' Departments, 3,447; Junior Departments, 5,136; Modern Secondary and Technical High Schools, 2,977; Academic Secondary Schools, 965; Special Schools, 180; Total=13,344; The numbers in the Schools are:—

No. on Roll at 31st December, 1954.

Primary Schools.	Nursery Classes	Infants' Dept.	Junior Dept.
Barden	—	175	254
Burnley Wood	—	143	—
Lionel Street	—	246	532
Stoneyholme	29	206	318
Rosegrove	—	126	249
Hargher Clough	—	—	465
Habergham	—	86	115
Heasandford	—	249	398
Coal Clough	30	168	—
Todmorden Road	61	301	487
Whittlefield	23	83	—
Rosehill	—	160	289
Healey Wood	—	72	101
St. Peter's	—	74	130
Pickup Croft	28	37	—
Holy Trinity	—	127	228
St. Stephen's	—	138	342
St. Andrew's	—	116	184
Wood Top	—	68	64
Lane Head	—	73	114
Back Lane	—	49	94
Myrtle Bank	—	188	—
St. Mary's R.C.	30	191	—
St. Thomas's R.C.	—	58	111
St. Mary Magdalene's R.C.	—	145	262
St. John's R.C.	—	111	294
St. Augustine's R.C.	—	57	105

Nursery Schools.	No. on Roll.
Accrington Road Nursery School	80
Habergham Nursery School	37
Rockwood Nursery School	40
Rosehill Nursery School	41
Myrtle Bank Nursery School	40
Lionel Street Nursery School	40
Elm Street Nursery School	40
Howard Street Nursery School	40
Rosegrove Nursery School	40
Barden Lane Nursery School	40

Modern Secondary Schools.		No. on Roll
Barden Boys' Modern Secondary	....	433
Burnley Wood Girls' Modern Secondary	....	437
Rosegrove Boys' Modern Secondary	....	428
Coal Clough Girls' Modern Secondary	....	428
St. Mary's R.C. Boys Modern Secondary	....	247
St. Hilda' R.C. Girls Modern Secondary	....	267

Technical High Schools.		No. on Roll
Heasandford Girls' Technical High School	....	360
Towneley Boys' Technical High School	....	377

Academic High Schools.		No. on Roll
Grammar School for Boys	....	498
High School for Girls	....	467

Special Schools.		No. on Roll
Coal Clough Special School for Educationally Sub-normal Children	....	60
Open Air School	....	120

SCHOOL CLINIC.

All Clinics of the School Medical Service, with the exception of the centre for bathing of verminous children and those suffering from scabies are centralised in the Elizabeth Street premises.

The total number of attendances of school and pre-school children at the various clinics was 28,732, an increase of 5,348 on the number for the previous year.

The School Clinic was open on 306 days.

CLINICS.

Medical inspection in schools—approximately ten sessions each week.
General ailments—daily.

Dental inspection in schools—two to three sessions each week.

Dental treatment—daily.

Minor ailment treatment—daily.

Immunisation against diphtheria and whooping and vaccination against smallpox—one session each week.

Orthoptic treatment—approximately eleven sessions each week (from January, 1955).

Orthopaedic exercises, physiotherapy, etc.—daily.

Artificial sunlight—two sessions each week.

Child Guidance—daily.

Speech therapy— daily.

B.C.G. vaccination against tuberculosis—sessions as required.

Specialist Clinics.

Ophthalmic—three sessions each week.

Orthopaedic—two sessions each month.

Ear, nose and Throat—sessions as required.

Paediatric—one session each month.

An educational psychologist took up duty on 1st January, 1954, after the position had been vacant for seven months. Unfortunately the services of a whole-time psychiatric social worker have not as yet been obtained, but for a short period during 1954, one was available for four sessions weekly.

It has not as yet been possible to obtain the services of a whole-time physiotherapist; the part-time physiotherapist undertakes from five to six sessions each week.

The establishment provides for two orthoptists to undertake duties in the School Eye Clinics of Burnley and the adjoining Division of Lancashire. One vacancy, which existed since 1952, was filled in January, 1955. During 1954, the single-handed orthoptist undertook approximately six sessions each week treating Burnley children, but since January, 1955, the two orthoptists now devote between them from ten to eleven sessions weekly to Burnley children.

STAFF OF THE SCHOOL HEALTH SERVICE.

Medical Officer of Health and Principal School Medical Officer:—

D. C. LAMONT, M.B., Ch.B., D.P.H.

School Medical Officers:—

L. J. COLLINS, M.B., Ch.B., B.A.O., D.P.H.

E. P. WHITAKER, M.B., Ch.B., M.R.C.S., L.R.C.P.

Principal Dental Officer:—

J. A. PILLING, L.D.S.

Assistant Dental Officer:—

K. JACKSON, L.D.S.

Part-time Dental Officer (two Sessions weekly)

J. JACKSON, L.D.S.

Ophthalmic Specialists (part-time):—

K. R. BROWN, M.B., D.O.M.S., D.O.

C. M. GEDDIE, M.B., Ch.B. (Died January, 1955)

Ear, Nose and Throat Specialist (part-time):—

T. S. STEWART, M.B., F.R.C.S.

Paediatrician (part-time)

W. M. L. TURNER, M.D., M.R.C.P., D.C.H., D.L.O.

Four Health Visitor-School Nurses; one Physiotherapist (part-time); one Educational Psychologist; two Orthoptists; one Speech Therapist; four Clerks; two Dental Clerk-Attendants.

Report.

CO-ORDINATION WITH OTHER HEALTH SERVICES.

The specialist clinics for eye and orthopædic defects and paediatrics are held in the school clinic premises. The paediatric clinic was established in June, 1953, cases being referred to the specialist by the school medical officers and from the infant welfare centres. The specialist clinic for ear, nose and throat defects, which was previously held in the school clinic premises, was discontinued early in 1955, and to meet the convenience of the specialist cases are now referred to him at his out-patient clinic in Victoria Hospital.

The specialists employed by the Manchester Regional Hospital Board in the Burnley Hospitals are also the officers who attend these clinics. Cases requiring hospital treatment are admitted to Burnley hospitals, where they receive treatment from the same specialists.

Ear, nose and throat and eye cases were admitted to hospital without any appreciable delay.

The School Health Service is closely co-ordinated with the services for the care of young children, vaccination and immunisation and prevention of illness and after-care administered in accordance with Sections 22, 26 and 28 of the National Health Service Act, 1946. The two medical officers who undertake the clinical duties in connection with medical inspection and clinic treatment of school children are also employed in the service for the care of infants and young children, and conduct infant welfare, immunisation and vaccination clinics. All the clinics and forms of treatment, including specialist clinics, are equally available for children attending schools and nurseries and for children referred from infant welfare centres.

The Thursby Convalescent Home, Lytham St. Annes, which is administered by a voluntary Committee, received 166 Burnley school children for periods of two to three weeks of convalescence between April and September. The selection of children is the responsibility of the School Medical Officers.

Information regarding the suitability of school leavers for different forms of employment is passed from the School Health Department to the Juvenile Employment Bureau of the Ministry of Labour.

School Hygiene and Sanitary Accommodation.

The urinals and water closets in most of the schools are modern in type and generally maintained in a satisfactory condition.

The modernisation of the conveniences in St. Stephen's Infants School should be undertaken in 1955 and when these alterations are completed all the un-hygienic trough-type school conveniences will have been abolished.

The Sanitary Inspectors make periodic inspections of the urinals and water closets in all Schools to ensure that they are maintained in a clean condition.

MEDICAL INSPECTIONS IN SCHOOLS.

The total number of pupils inspected in the Schools was 4,681, which is 35% of the total on the rolls. In addition, inspections for special purposes or re-inspections of pupils suffering from defects or diseases amounted to 7,107 so that altogether, 11,788 examinations were made.

The following table gives details of the ages of the children submitted to routine inspection:—

ENTRANTS									SECOND AGE GROUP						THIRD AGE GROUP						Other Periodic Inspec'ns.
2	3	4	5	6	7	8	9	Total	10	11	12	13	Total	14	15	16	17	18	19	Total	
63	63	180	377	79	38	27	24	851	521	93	32	23	669	468	38	50	9	6	1	572	333
45	83	176	366	72	37	37	28	844	512	84	43	24	663	383	29	41	5	11	1	470	279
108	146	356	743	151	75	64	52	1695	1033	177	75	47	1332	851	67	91	14	17	2	1042	612

	Boys	Girls	Total
Total Routine Inspections	2425	.... 2256	.... 4681

Other Inspections:—

No. of Special Inspections and Re-inspections :—	Special inspections	Re-inspections	Total
At Schools	266	.... 5020	.... 5286
At School Clinic	1263	.... 558	.... 1821
	—	—	—
	1529	.... 5578	.... 7107
	—	—	—

Visits of Medical Officer.

The number of visits paid to the Schools were:—

For Routine Medical Inspection : 345

For " Following-up " Defects : 16

The 612 other periodic inspections shown above are in respect of children who were first inspected as " entrants " in the nursery classes and who are now between six and eight years of age. These additional inspections were made to bridge the gap of six or seven years before they are due to be inspected in the second age group, when they reach the age of 10 years.

In addition to 16 special visits to schools for the following-up of defects, the Medical Officers saw, at the completion of the routine inspections in each school, children who required supervision on account of defects found at a previous inspection.

The Nursery Schools and Nursery Classes. The ten nursery schools have 438 young children on the roll and the nursery classes in six other schools have 201 making a total of 639 children under five years of age who receive nursery care. Frequent visits for supervision of these young children were made during the year, and 449 were given a full routine medical examination.

REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

The statistical tables will be found in the appendices.

The statistics of routine inspections show that of 4,681 pupils inspected in the various age groups, 571 were found to require treatment, apart from dental attention. In the entrant group the percentage of children with defects

is 13·9% as compared with 14·1% in 1953. In the second and third age groups the percentages are lower than those of the previous year. Of the total children inspected 12·2% required treatment, as compared with 13·1% in 1953 and 9·4% in 1952.

Of the 571 found to require treatment, 123 had vision defects, mainly errors of refraction. This is 2·6% of the total inspected, whereas in 1953 2·9% were found to have defective vision. 218 children were examined by the eye specialist for the first time and 764 who had been under supervision in previous years were re-examined. 191 children were prescribed spectacles for the first time and 466 who had previously worn spectacles and whose vision showed changes were supplied with prescriptions for new spectacles through the authority's eye clinic. In addition, 135 children were prescribed spectacles otherwise than through the School Health Service. The children in the youngest age group again had fewer vision defects than the older pupils. One hundred and thirty six pupils were found to squint, and in 100 the divergence was considered to be sufficiently great as to necessitate reference to the specialist.

At both routine and special inspections 936 children were noted in whom nose and throat defects were present to a greater or lesser extent. The majority of these had enlarged or unhealthy conditions of tonsils and evidence of adenoids. Only 174 required to be referred to the specialist for further opinion or treatment.

Diseases of the heart and circulation showed a larger incidence to that of the previous year, being present in 1·1% of those inspected. This compares favourably with the average incidence of 2·2% during the quinquennium 1948-1952. Most of the heart conditions were functional; cases of severe organic disease following rheumatic fever or acute infections are now relatively rare.

The reduction over a period of years in the percentage of children found to have defects requiring treatment is an indication of their improved health and physical condition. The percentage found during routine medical inspection to have defects requiring treatment averaged 12·0 over the decennium 1945 to 1954, whereas in the previous decennium (1935 to 1944) the average was 21·4.

Vermin Infestation. The health visitors made 153 surveys in schools, for general cleanliness and to detect vermin infestation. 44,295 inspections were made of individual pupils. 737 instances of infestation in respect of 555 pupils were found. The usual home visits were made and mothers were advised on appropriate measures to cleanse children's hair and prevent re-infestation.

This is not a serious problem in schools today, the instances of infestation being only 1·6% of the children inspected by the health visitors. Generally the infestation is limited to some nits in the hair of girls, and the presence of lice is extremely rare. Where infestation is found, it is almost invariably in families who are otherwise unsatisfactory, the children being generally neglected, mothers thrifless and homes dirty.

Clothing and Footgear. Again during 1954, as in previous years careful inspection was made by the Medical Officers of the clothing and footgear of children to see if present-day conditions were causing children to be badly or insufficiently clad. An analysis of the findings in respect of 4,681 children shows that only four had defective clothing and three had defective footwear.

	Clothing.		Footgear.	
	No. of Children	%	No. of Children	%
Children classified as very good	4265	91.1	4258	90.9
Children classified as good	412	8.8	420	9.0
Children classified as defective	4	0.1	3	0.1
Children classified as very defective	—	—	—	—

The Physique of the School Child (as judged by weight and height).

The heights and weights of all children submitted to routine inspection are recorded, but in order to make comparison of the present heights and weights of children with that of previous years, only those measurements in respect of children at ages of three, five, ten and fourteen years are used in the comparison.

Although over a long period of years there has been a marked improvement in the heights and weights of children at all ages, it is noted that during the last three years, there is a tendency for these to show a slight decrease. For instance, in both boys and girls in the three-year old group there has been a significant fall in the average weight in the three years 1952 to 1954 as compared with the two preceding years. In the five-year-old group, both sexes show slight reductions in both heights and weights during the years 1953 and 1954 as compared with those of the few years immediately preceding. In the ten-year old and fourteen-year old groups, weights of both sexes show a decrease in the years 1952 and 1953, but in both groups and in both sexes the weights in 1954 again showed an upward tendency.

The numbers of children in each group and the periods under consideration are too small to enable any firm deductions to be made, but it will be necessary to observe carefully the tendency of height and weight averages during the next few years.

AVERAGE HEIGHT AND WEIGHT OF PUPILS.

	Aged 3 Years		Aged 5 Years		Aged 10 Years		Aged 14 Years	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
	63	83	377	366	521	512	468	383
Number Inspected	63	83	377	366	521	512	468	383
Average Height in inches	38.5	37.4	42.9	42.4	53.4	53.2	62.3	61.3
Average Weight in pounds	35.2	35.1	42.4	41.1	70.9	69.1	103.8	105.7

General Nutritional Condition. The nutritional condition of children at all ages continues to be very satisfactory, and evidence of malnutrition is now very rare. Of 4,681 pupils, whose nutritional condition was noted, only 10 were considered to be in poor nutritional condition and seven of these were in the youngest age group. Among the third age group of pupils aged 14 years and over, none was found to be in a poor state of nutrition. Of all the pupils classified for this purpose 63.2% were considered to be in "good" condition, 36.6% in "fair" condition and 0.1% "poor." The comparative figures for 1953 were 59.3% "good" 40.5% "fair" and 0.2% "poor."

THE INSPECTION CLINIC.

During the year 1,263 children attended the Inspection Clinic, the total attendances being 1,821. 1,789 of the attendances were in respect of defects which did not require the exclusion of the children from Schools. Certificates of exclusion from school for varying periods were granted in respect of the remaining 32 attendances.

It is worthy of note that only two cases of ringworm and twenty-five of impetigo required to be treated at the clinic, and that during routine inspection of 4,681 children in schools, none was found to suffer from ringworm or scabies and only two cases of impetigo were found.

The following is a summary of the defects found in school children attending the inspection clinic:—

	Requiring Treatment	Requiring Observation
Ringworm	2	—
Impetigo	25	—
Other Skin Diseases	58	11
Eye Defects	330	65
Ear Defects	62	18
Nose and Throat Defects....	92	42
Speech Defects	29	11
Cervical Gland Enlargement	7	6
Heart and Circulation Defects	9	5
Lung Diseases	28	14
Development Defects	13	4
Orthopaedic Defects	57	16
Nervous System Defects	23	5
Psychological Conditions	31	4
Other Conditions	316	19
Total	1082	220

Miscellaneous Examinations. In addition to the above, the following examinations were made at the Clinic:—

Examinations for fitness for admission to Orthopaedic Hospitals....	....	5
Examinations for fitness to go to Camp School ....	....	545
Examinations for fitness for Convalescent and Holiday Homes ....	....	162
Examinations prior to admission to Residential Schools and Approved Schools ....	....	5
Examinations of children to be boarded out (for Children's Department)....	....	62
Examinations for fitness for employment on leaving School ....	....	36
Examinations and reports for Juvenile Court ....	....	44
Miscellaneous Inspections by nurses ....	....	571
Examinations for suitability for employment out of school hours....	....	150

FOLLOWING UP.

Pupils with defects were followed up by the school nurses as in former years, to ensure that treatment was received where necessary and in order to give advice and guidance to parents and teachers regarding pupils who required supervision.

The following shows the amount of work done.

No. of visits by the Medical Officers to schools:—	
For inspection (i.e. to follow up children with defects)	.... 16
Follow up visits by the Nurses for	
Dental Defects ....	.... 14
Defective Vision ....	.... 4663
Nose and Throat Defects ....	.... 128
Other Defects ....	.... 3119
	—
	7924

INFECTIOUS DISEASE.

Review of the action taken to detect and prevent the spread of Infectious Disease.

Certificates of exclusion from school and lists of houses in which infectious diseases occur continue to be sent daily to the Education Office.

Diphtheria has decreased spectacularly during the last nine years. The numbers of cases which occurred annually were:—

1946—71	1949—9	1952—1
1947—28	1950—1	1953—0
1948—14	1951—0	1954—0

Ninety five cases of scarlet fever occurred in children of compulsory school age, a decrease of sixteen on the previous year.

Measles was not prevalent in extensive epidemic form during the year, of the 226 cases, 156 occurred in children of compulsory school age (5—14 years) and 70 in children under five years of age. Of the 77 cases of german measles, 35 were in children aged 5—14 years and 40 in children under five years of age.

Whooping cough, although not unduly prevalent at any one time, attacked 103 children of school age, this being an increase of 15 on the corresponding figure for 1953.

Ten cases of primary pneumonia equalled those notified the previous year, and tuberculosis was diagnosed in 9 school children, as compared with 10 in 1953.

The notifiable diseases among children of compulsory school age (5—15 years) notified to the Medical Officer of Health were as follows:—

Disease	No. of Notifications	Deaths
Scarlet Fever	95	—
Whooping Cough	103	—
Diphtheria	—	—
Measles and German Measles	156	—
Primary and Influenzal Pneumonia	10	—
Meningococcal Infection	1	—
Dysentery	19	—
Respiratory Tuberculosis	7	—
Non-Respiratory Tuberculosis	2	—
Acute Poliomyelitis	—	—
Food Poisoning	—	—
Para-typhoid Fever	—	—

Immunisation against Diphtheria. In 1954, the number of children immunised against diphtheria under the local Health Authority's arrangements, both in the central clinic and by general practitioners, was 958. It is estimated that at 31st December, 1954, the child population of the Borough consisted of 6,000 children under five years of age and 11,500 between five and fifteen years. Of these only 50.8% of the under fives and 74.2% of the five to fifteen year age group have been immunised against diphtheria. These percentages do not however, show a true immunity index, because many of the children have not received "booster" injections and immunity is reduced with passage of time.

Age groups of children with a satisfactory degree of immunity are:—

Under 1 year	....	....	....	....	11·6%
1-4 years, incl.	....	....	....	....	60·0%
5-14 years, incl.	....	....	....	....	23·0%
Total under 15 years	....	....	....	....	32·5%

The numbers dealt with during 1954 were:—

Immunisation Completed	Under 5 years	Primary 5-14 Years	Adults	Total	No. of Re-inforce-ment Injections (all ages)	Total Immunised
At L.A. Clinic....	535	102	—	637	439	1076
By Medical Practitioners	305	16	—	321	189	510
Total	840	118	—	958	628	1586

B.C.G. Vaccination against Tuberculosis.

In 1949 the Ministry of Health recommended the adoption of B.C.G. vaccination as a form of protection against tuberculosis for contacts of persons suffering from the disease. Vaccination commenced in 1950 and was undertaken by the Chest Physician as part of the service for prevention and after-care of tuberculosis.

Protection against tuberculosis is now an approved and accepted procedure. The principle of the procedure is to produce in the human body an artificially acquired resistance to the disease by a method of vaccination which generally gives immunity or greatly reduces the risk of contracting tuberculosis, and if any person so protected should subsequently contract tuberculosis the disease will be much less severe.

Towards the end of 1953 the Ministries of Health and Education issued Circulars to local authorities which stated that the Ministry of Health was prepared to approve the extension of these arrangements to school children in the year preceding their fourteenth birthday, subject to the consents of their parents.

The Education and Health Committees subsequently approved a scheme and B.C.G. vaccination of school children was commenced in August, 1954. Vaccination is performed by the two Medical Officers, who have received special instruction in the technique and have been designated to undertake the work. Vaccination is given to children towards the end of the year preceding their fourteenth birthday, so that they will be protected in their penultimate year at school. This will enable these children to be followed for at least a further year.

Vaccination was offered to 840 pupils of whom 568 (67.6%) accepted it. Of these, 421 (74%) were found to be suitable and were protected. Particulars are as follows:—

No. of Pupils in 13 year age group—		Boys	Girls	Total
(a) To whom B.C.G. vaccination was offered	....	406	434	840
(b) No. of above (a) who accepted	....	289	279	568
(c) No. of (b) who were found to be:—				
(i) Mantoux negative	....	212	209	421
(ii) Mantoux positive	....	77	70	147
(d) No. of (c) (i) who were given B.C.G. vaccination	....	*212	209	*421
(e) No. of (d) whose Mantoux test was positive after B.C.G. vaccination	....	191	204	395
(f) No. who required a further B.C.G. vaccination as not rendered Mantoux positive after 1st vaccination	....	19	5	24

* Includes two boys who had left town before post-vaccinal test was due.

Total attendances at B.C.G. Clinic 2,092

MEDICAL TREATMENT.

The only alteration made in the arrangements for treatment of school children listed on page 6 was the cessation, early in 1955, of the ear, nose and throat clinic held in the Elizabeth Street premises and the reference of children to the Consultant Ear, Nose and Throat Surgeon at his out-patient clinic in Victoria Hospital. The staffing by hospital consultant staff of the ophthalmic, paediatric and orthopaedic clinics held in the Authority's premises ensures good co-operation with the local hospitals, when operative treatment is required. Co-operation with general medical practitioners continues to be satisfactory and interchange of information and clinical reports between the school medical officers and general practitioners and hospital medical staffs is well maintained.

The 28,732 attendances for all purposes at the Clinic are 5,348 more than in 1953.

Total Clinic Attendances (Pre-School and School Children).

	Minor Ailments	Ophthalmic	Dental	Inspection	Ear, Nose and Throat	Orthopaedic	Orthoptic	Speech Defects	Child Guidance	Sunlight	B.C.G. Vaccination	Miscellaneous	TOTAL
all Children	4,063	3,506	5,411	1,821	126	3,175	1,651	2,220	415	566	2,092	1,580	26,626
School Children	124	287	26	87	4	657	77	—	—	836	—	8	2106

Minor Ailments—Attendances for treatment.

School Children.

Diseases	No. of Cases under treatment 1/1/54	Number of new Cases	Total No. of cases dealt with	No. of Attendances
SKIN:				
Ringworm: Scalp	—	—	—	—
Body	1	2	3	34
Scabies	—	—	—	—
Impetigo	—	31	31	358
Other Skin Diseases	2	46	48	392
EYE:				
Blepharitis	—	7	7	91
Conjunctivitis	—	6	6	19
Iritis	—	—	—	—
Keratitis	—	—	—	—
Corneal Ulcer	—	—	—	—
Other Eye Conditions	—	50	50	345
EAR:				
Otitis Media	—	4	4	75
Other Ear Diseases	3	33	36	506
MISCELLANEOUS, e.g., Minor Injuries, Bruises, Sores, etc.	1	248	249	2243
	7	427	434	4063

The high standard of general physique and cleanliness now found in school children compared with that of some twenty or more years ago, has resulted in fewer minor ailments, skin and external eye infections, and consequently fewer attendances for treatment at the clinic. The decrease is shown in the following figures of attendances for treatment. Whereas over twenty years ago, the daily attendances for treatment by the school nurses were generally over one hundred, to-day the figure rarely exceeds twenty.

Year	Total number of Children on the School Rolls	No. who required minor ailment treatment	Percentage of total school population who required treatment
1920	15,665	1,657	10·6
1930	13,172	1,773	13·5
1940	9,942	1,121	11·3
1945	10,388	1,220	11·7
1946	10,404	855	8·2
1947	10,757	759	7·0
1948	10,900	618	5·7
1949	11,599	496	4·3
1950	12,020	379	3·1
1951	12,205	478	3·9
1952	12,736	610	4·8
1953	13,059	636	4·9
1954	13,344	434	3·3

Pre-School Children at the School Clinic. The following cases were referred from the Infant Welfare Centres for treatment at the Minor Ailment Clinic.

			No. of Cases		No. of Attendances
Skin:					
Ringworm: Head	....	....	—	....	—
Body	....	....	—	....	—
Scabies	....	....	—	....	—
Impetigo	....	....	3	....	16
Other Skin Conditions	....	....	2	....	11
EYE:					
Blepharitis	....	....	—	....	—
Conjunctivitis	....	....	—	....	—
Other Eye Conditions	....	....	12	....	61
EAR:					
Otitis Media	....	....	—	....	—
Other Ear Conditions	....	....	3	....	21
Miscellaneous, e.g.,					
Minor Injuries, Bruises, Sores, etc.	....	7	....	15	
	Total	....	27	....	124

Ear, Nose and Throat Defects. The ear, nose and throat specialist held eleven consultant clinics in the School Clinic premises during 1954. Children requiring tonsil and adenoid operations are generally admitted to a ward for this purpose in the Grove House Annexe of Reedyford Hospital, but occasionally older children are operated on in the General Hospital. They enter the hospital on the day prior to, and are retained for at least forty-eight hours after the operation. Children requiring operative procedures for other ear, nose and throat conditions are dealt with in the special department of the General Hospital. Throughout the year the specialist made 126 examinations in the Clinic and performed 33 operations. In addition 59 children had tonsils and adenoids removed by arrangements otherwise than through the School Health Service. At the end of the year, only four pupils were awaiting admission to hospital for operations.

Eye Diseases and Visual Defects.

OPHTHALMIC CLINIC.

ERRORS OF REFRACTION.

Classification of patients dealt with in 1954.

Defect	New	Old	Total
Hypermetropia	10	51	61
Hypermetropia plus Aphakia	1	—	1
Hypermetropic Astigmatism	54	167	221
Myopia	52	86	138
Myopic Astigmatism	20	80	100
Mixed Astigmatism	15	49	64
Anisometropia	—	5	5
Nystagmus	—	—	—
STRABISMUS	—	—	—
plus Hypermetropia	20	106	126
,, Hypermetropic Astigmatism	29	187	216
,, Myopic Astigmatism	2	6	8
,, Mixed Astigmatism	1	6	7
,, Myopia	2	1	3
Not yet classified	15	6	21
Found to have normal vision	3	8	11
Totals	224	758	982

ORTHOPTIC TREATMENT.

The following table shows the number of children who attended for examination and treatment by the Orthoptist. All cases requiring orthoptic treatment are selected by the Ophthalmic Surgeon.

NO. OF INDIVIDUAL CHILDREN:—	School Children	Child Welfare		Total
		Cases	Total	
(a) Received Treatment	61	1	62	
(b) Under Supervision	333	41	374	
	394	42	436	

ATTENDANCES:—

(a) For Orthoptic Examination	125	2	127
(b) For Treatment	609	1	610
(c) For Inspection and Supervision	917	74	991
	1651	77	1728

RESULTS OF TREATMENT CASES:—

(a) Discharged—cured	22	—	22
(b) Discharged—improved	15	—	15
(c) Treatment suspended	10	1	11
(d) Ceased to attend	3	—	3
(e) Under treatment at end of year	11	—	11
	61	1	62

CHILDREN REFERRED FOR OPERATIVE TREATMENT ..	44	4	48
CHILDREN RECEIVED OPERATIVE TREATMENT ..	35	3	38
No. of sessions devoted to treatment or supervision ..	....	....	252

The following notes are submitted by the Senior Orthoptist.

An Orthoptic Department has been established in Burnley for many years and is probably generally regarded as the department "where squints are cured," but this is not strictly correct. The department is an integral part of the larger Ophthalmic Department, under the supervision of a Consultant Ophthalmologist, and squints are treated, and either cured or improved as a result of a combination of methods, such as:—

Optical, i.e., the correction of any error of refraction. Glasses are prescribed by a Consultant Ophthalmologist.

Occlusion, i.e., covering of a "good" eye to promote use of a "lazy" eye, and thereby overcome loss or prevent deterioration of visual acuity in that eye. This is supervised in the Orthoptic Department.

Diagnosis of the type of squint and state of binocular functions. This is carried out in the Orthoptic Department.

Treatment by either orthoptic or surgical methods, or a combination of both.

Occlusion.—One of the most valuable aspects of the work of orthoptists is the supervision of occlusion in order to prevent or overcome amblyopia ex anopsia (i.e. loss of sight due to disuse). It cannot be stressed too strongly or too often that the time when specialist advice should be sought for any child who develops a squint is when the squint begins, no matter what the age. If such children were put under the care of a specialist department early, treatment could be instituted to prevent deterioration of sight in the squinting eye, which is preferable to having to overcome partial and sometimes quite serious loss of sight where adequate treatment has been delayed. Recovery of normal sight is not always possible when too much time elapses between the onset of the squint and the commencement of treatment. In fact, there are people who are registered as blind persons, in whom the cause of blindness is different in the two eyes, and in whom the cause of one of the eyes being blind is amblyopia ex anopsia. It might be assumed that had this condition been treated correctly in childhood, these people might not now be on the blind register.

Maternity and Child Welfare officers, general practitioners and health visitors have a responsibility to give correct advice and refer children as early as possible for specialist opinion. Whilst in this respect the situation is improving, one still occasionally hears that a parent has been advised to "wait and see if the child will grow out of it" or "wait until he goes to school" or that treatment was "not urgent as the squint was only slight." It should be more widely known that the degree of squint is, generally speaking, in no way related to the degree of potential loss of sight. A slight squint is just as likely to result in serious reduction of visual acuity as a marked squint, and it is these cases which are often not referred until, as a result of routine medical inspection carried out in the schools, it is found that the sight of one eye is poor. Indeed, it is possible to have a "lazy" eye without having a squint at all, and conversely, it is possible to have a squint without having a "lazy" eye.

One occasionally hears that a parent thinks that occlusion will result in impaired vision in the "good" eye. This might be possible in certain cases if the occlusion was worn for too long without the child attending for supervision, but this is not allowed to occur. There is no case on record of any such permanent impairment of visual acuity. Children wearing occlusion attend at frequent intervals to have the visual acuity of the two eyes recorded. Thus the improvement in the amblyopic eye can be noted and the acuity checked of the eye which is covered. The vast majority of these cases can achieve equal or almost equal vision in the two eyes provided treatment is commenced as soon as

possible and there is sufficient home co-operation.

Diagnosis.—All cases of squint have the degree of deviation measured and the binocular functions investigated in the Orthoptic Department for, to use a well-known quotation, "An Orthoptic Department must be diagnostic before it can be therapeutic." This diagnosis is carried out as soon as any amblyopia ex anopsia has been overcome, and enables a decision to be made as to the means by which the squint should be treated. Many factors have to be considered when examining a squint and taken into account when a prognosis is made as to the possibility of the cure being functional or cosmetic. The age of onset of the squint, the age at which treatment is first started, the intelligence of the patient and co-operation of the parent all play an important part.

Treatment.—Orthoptic treatment has undergone changes since, many years ago, it was hailed as the "cure for all squints." This conception has, in recent years, become modified and modern ideas on squint treatment have led us to be more accurate in our diagnosis and therefore in our prognosis, and more selective in the type of case accepted for regular treatment. Orthoptic treatment is not usually a substitute or alternative to surgery. Certain types of squint are curable without surgery, by a combination of optical and orthoptic methods. In these cases exercises, or what are possibly more accurately described as "lessons" are given in the clinic, but must be supported by further exercises carried out daily at home. The intelligence of the child and the interest and co-operation shown by the parent play a great part in the success of the treatment. Full instruction is given to the parent regarding home exercises and in a good number of cases the exercises are carried out with enthusiasm, but there are still far too many cases where the parents are very willing to allow the children to attend the clinic but are either unwilling or unable to play any active part in the home exercises. In such cases treatment is prolonged and unsatisfactory. It is usually found that it is in the homes where both parents are out at work all day that co-operation is not so good as is desirable, and is probably due to the fact that the mother is already over-worked and is unable to spare time to help the child at home.

Other types of squint which require surgical correction have the angle of deviation measured and state of binocular functions investigated in the Orthoptic Department prior to surgery being carried out.

Recent ideas on squint treatment have led ophthalmologists to believe that, in suitable cases, the earlier surgical correction is carried out the greater are the chances of a functional cure as apart from a cosmetic one, and, therefore, if the child is not old enough to have a full investigation carried out, this does not mean that surgical interference is delayed, for to quote Mr. Keith Lyle this would "surrender a hopeful present for a doubtful future." In cases where surgical correction is indicated, the role of orthoptic treatment is to try to re-educate the binocular functions if, as a result of the diagnosis, this is considered possible, and is not expected to correct the actual deviation although it can assist in a better post-operative result being obtained. The surgeon and orthoptist must work together as a team and the orthoptist should be present when the patient is examined by the surgeon. In some School Clinics this is not possible, but in the Burnley Clinic the orthoptist is present at all sessions where her patients are seen by the surgeon and, therefore, joint consultation is facilitated.

So far as the Orthoptic Clinic itself is concerned, an appointment system is in operation which obviates the necessity for long periods of waiting and is appreciated by the parents who do attend. Attendance is good during the school terms, but it is regrettable that it is not so good during school holidays. Once again it is felt that it is partly due to mothers being out at work and the children being left to their own resources.

School teachers have been extremely helpful in sending children to the clinic and general practitioners have co-operated by prescribing occlusion plaster for the patients, so that it can be obtained through the National Health Service. This enables the mother to apply the occlusions at home and saves both the time of the parent from work and the time of the child from school, which repeated attendance at the clinic would require.

THE ORTHOPAEDIC CLINIC.

The Assistant Orthopædic Surgeon held 19 Consultant Clinic Sessions in the School Clinic premises. The types of cases dealt with are summarised below.

				School Children.	Pre-School Children.
New cases examined....	....	....	....	18	21
Old cases examined ....	....	....	....	114	21
Attendances of old cases	....	....	....	178	62

CLASSIFICATION OF DEFECTS:—

Infantile paralysis....	....	....	....	10	....	—
Spastic paralysis ....	....	....	....	10	....	—
Deformities of feet—						
(a) talipes	....	....	....	19	....	5
(b) other	....	....	....	32	....	9
Other deformities of lower limb ....	....	....	....	11	....	14
Spina Bifida	....	....	....	1	....	—
Other deformities of spinal column	....	....	....	11	....	1
Torticollis	....	....	....	4	....	4
Schlatter's disease	....	....	....	1	....	—
Dislocation of hip joint	....	....	....	5	....	1
Arthritic diseases	....	....	....	4	....	—
Tuberculous bone and joint disease	....	....	....	2	....	—
Traumatic and postural conditions	....	....	....	16	....	6
Other conditions	....	....	....	6	....	2
				132		42

THE ORTHOPAEDIC CLINIC—continued.

38 school children and 27 pre-school children were supplied with splints, plaster cases or other surgical appliances.

One case was receiving hospital treatment on 1st January, 1954; eight were admitted to hospital during the year; six were discharged from hospital during the year, leaving three in hospital at the end of the year. The average duration of stay in hospital of those discharged was 174 days.

At the end of the year, 137 children remained on the register (101 school children; 36 pre-school children).

Sessions held by Physiotherapist—

(a) for orthopaedic treatment	....	....	....	236
(b) for artificial sunlight treatment	....	....	....	99

In addition to the treatment of patients on the Orthopaedic Clinic Register, the physiotherapist gave remedial exercises, massage, breathing exercises, etc., to children with minor deformities and postural defects and post operative tonsil and adenoid cases referred to her by the school medical officers.

The following children were referred by the school medical officers directly to the physiotherapist for treatment.

		School Children	Pre-school Children
No. of cases	....	183	41
Treatments:		—	—
For remedial exercises	....	863	164
For breathing exercises	....	1789	227
For corrective treatment	....	211	66
Total	....	<u>2863</u>	<u>457</u>

The total attendances at the orthopaedic clinic were 3,832

Report on the work of the School Dental Department.

By Mr. J. A. Pilling, L.D.S.

In the year under review there have been no changes in personnel, and the staff remains at two full time dental officers, and one part time dental officer devoting two sessions per week as anaesthetist.

All schools were visited once during the year. The rate of acceptance was 2% lower than in the previous year, viz. 51%. Here it may be noted that the oral health of the school population is decreasing. There is little evidence of active oral hygiene, and this fact, coupled with a return to "sweet chewing" and soft, sugary diets does not augur well for the future. Because the effects of neglect can so readily be countered, there is much less consideration given to daily care. It is for this reason that the ratio of fillings to extractions is so low. But what can be expected when a child walks into the surgery with a bag of sweets as a reward for having treatment? This happens quite often, even in these enlightened days.

There has been an increase in the number of requests for immediate emergency treatment, often when treatment has previously been refused by the patient. Whilst every effort is made to allay suffering, it is not always possible to carry out treatment immediately. There seems to be an idea abroad that "when other helpers fail and comforts flee," go to the clinic. Relief of pain is our first priority, but it must be appreciated that this depends on the exigency of the entire service.

The needs and requests for orthodontic treatment continue to increase. Much of the work is carried out at the Clinic, but cases beyond the scope of the Clinic have been sent to Mr. Batten, of King Street, Manchester and Mr. Hartley, of the Manchester Dental Hospital. It is interesting and necessary work, but needs the full co-operation of parent and patient if it is to succeed.

During the year nine crowns and one inlay have been fitted, and twenty five partial dentures have been inserted. Twenty one children have attended the Victoria Hospital for X-ray examinations, to assist in diagnosis and treatment.

There has been an increase in attendances for "other operations." Attendances for these often take longer than the routine work, and include pulp removal, crown and root preparation, root fillings, impressions for orthodontic and prosthetic work, interviews and arrest of bleeding.

Opportunity is taken during routine dental inspection in the schools to impress upon the scholars the importance of sound teeth and dental care. One of the dental surgeons gave a talk on dental hygiene and the importance of regular and early dental treatment to children at a Saturday morning film club in a local cinema when a film on the subject was being shown.

I wish to acknowledge the assistance readily given by the dental Consultant, the Manchester Dental Hospital and the X-Ray Department of Victoria Hospital. By their willing co-operation the head teachers have contributed greatly to the work of the School Dental Service. A close and happy liaison is maintained with the local private dental practitioners.

Number Inspected in Schools			Not Requiring Treatment		Number with Defects Requiring Treatment	
Boys.	Girls.	Total.	Boys.	Girls.	Boys.	Girls.
6,100	5,096	11,196	3,526	2,791	2,574	2,305

Number found, at school inspection, to require treatment 4879
 Number of casual attenders who required treatment 1432

Total 6311

Number who attended School Dental Clinic.... 3319

Parents indifferent and no treatment received, or treatment received privately, or left school or town 2066

Dental treatment given:—

Fillings			Extractions.			Adminis- trations of General Anaes- sthetics for Ex- tractions	Other Operations		
Temp- orary Teeth	Per- manent Teeth	Total Fillings	Temp- orary Teeth	Per- manent Teeth	Total Extrac- tions		Temp- orary Teeth	Per- manent Teeth	Total. other Opera- tions
79	1,304	1,383	4,893	1,431	6,324	2,328	8	1,315	1,323

No. of orthodontic cases under treatment on 1/1/54 8
 No. of orthodontic cases commenced during the year 25
 No. of orthodontic appliances provided (26 patients).... 30
 No. of repairs or alterations to appliances 1
 No. of cases undergoing orthodontic treatment on 31/12/54 ... 13
 No. of other appliances provided—Crowns 9
 Inlay 1
 No. of partial dentures provided (24 patients).... 25
 Repairs to partial dentures 7
 No. of patients whose treatment was completed or discontinued 20

School Camp. The permanent Camp School at Hest Bank, near Morecambe was opened on April 9th and closed on 8th October. 261 boys and 264 girls were sent to camp for a fortnight. This entailed the medical examinations of 545 children.

Convalescent Home. The Thursby Convalescent Home at Lytham-St. Annes was open for the reception of children from 13th April to 28th September. 92 boys and 74 girls from Burnley were selected and sent to the Home for periods of two weeks.

PROVISION OF MEALS AND MILK.

Meals Provided: —		During year ended 31/3/55	During year ended 31/3/54
Breakfasts (approx.) ....	....	207,000	216,500
Dinners ....	....	1,121,600	1,055,000
Teas ....	....	327,100	328,500
		1,655,700	1,600,000

The highest number of children fed in any one week was 28,346 and the lowest 24,174, the average, excluding holidays, being 22,433.

Milk. In December, 1954, 10,358 children (7,836 Primary and Nursery, 2,359 Secondary, and 163 Special), received milk. Thus about 78% of the school children were receiving milk at the end of the year.

In accordance with the recommendations of the Ministry of Education in Circular 1443, for the selection of children requiring supplementary nourishment, periodical nutrition surveys were continued.

Cod Liver Oil. Three hundred and sixty six children received cod liver oil and malt preparations (total 767 lbs.), and vitamin preparations.

School Baths. The Education Committee arrange for the attendance of classes of children at the Public Swimming Baths, usually during school hours. 68,907 attendances were made at the three swimming baths, compared with 67,293 last year.

School Journeys. No alterations have been made in the arrangements in operation to enable children to travel free on public vehicles to the Special Schools and the School Clinic.

CO-OPERATION OF PARENTS, TEACHERS, SCHOOL WELFARE OFFICERS AND VOLUNTARY BODIES.

My reports for the years 1951, 1952 and 1953 give the various organisations, both statutory and voluntary, and individuals with whom close co-operation is maintained. This co-operation is now firmly established and is invaluable in ensuring smooth and efficient functioning of the School Health Service.

The Mass Miniature Radiography survey was completed in April 1954, and final figures are now available. These show that of 1,383 school children aged 14 years and over, two girls were found to be suffering from tuberculosis ; and of 2,283 under 14 years of age, one girl was tuberculous. Other defects found in the school children X-rayed were:—

Inactive pulmonary tuberculosis	....	....	....	....	39
Chronic bronchitis and emphysema	....	....	....	....	4
Broncho-pneumonia	....	....	....	....	2
Bronchiectasis	....	....	....	....	16
Cardio-vascular lesions	....	....	....	....	7
Sarcoidosis ....	....	....	....	....	2

Parents continue to attend well when their children are being examined at the clinic and on the first inspections in schools. The numbers of parents who were present when children were being submitted to routine inspection were:—

With the Entrants	....	....	....	111 or 65.5%
" " Second Age Groups	....	....	....	382 or 28.7%
" " Third Age Groups	....	....	....	14 or 1.3%

HANDICAPPED PUPILS.

Educationally Sub-normal and Maladjusted Pupils. At the end of the year, 62 educationally subnormal pupils were receiving education in special schools. 60 were in attendance as day pupils at Coal Clough Special School, the other two being in residential schools or boarding homes. Eighteen educationally subnormal pupils who required special education were ascertained during 1953 and 16 were transferred to special schools.

Seven children left the Day Special School for Educationally Sub-normal Pupils during 1954. Of these, 3 returned to primary or secondary schools, 3 reached school-leaving age and commenced work, and 1 was admitted to a residential special school.

No children were reported to the Local Health Authority during the calendar year, under Section 57(3) or Section 57(5)—of the Education Act.

On 31st December, 1954, there were 24 mentally defective children under 16 years of age as follows :—

	Boys		Girls		Total
Under Statutory Supervision	....	8	....	8	....
Under Voluntary Supervision	....	1	....	1	....
In Hospitals	....	3	....	3	....
	12	....	12	....	24

Seven boys and six girls were in attendance at the Local Health Authority's Occupation Centre for ineducable defectives, at the end of 1954.

Wennington Hall Residential Special School for Boys, which is controlled jointly by Blackpool, Bury, Barrow-in-Furness and Burnley Education Authorities, was opened in October, 1954. One maladjusted boy was newly placed there and another was transferred there from another residential special school.

Handicapped Pupils requiring Education at Special Schools (other than Hospital Schools) or Boarding in Boarding Homes.

	(1) Blind. (2) Partially sighted.	(3) Deaf. (4) Partially Deaf.	(5) Delicate. (6) Physi- cally Handi- capped.	(7) Educa- tionally sub-normal. (8) Mal- adjusted.	(9) Epi- leptic	Total 1—9				
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
In the calendar year: ended 31st Dec., 1954										
a. Handicapped Pupils newly placed in Special Schools or Board- ing Homes	—	—	—	—	24	—	16	1	2	43
b. Handicapped Pupils newly ascertained as requiring educa- tion at Special Schools or board- ing in Homes	—	—	—	—	24	1	18	2	3	48
On December 1st, 1954										
c. Number of Handi- capped Pupils from the area—										
(i) attending Special Schools as										
(a) Day Pupils ..	—	—	—	—	117	—	60	—	—	177
(b) Boarding Pupils ..	—	—	—	1	—	1	—	2	—	4
(ii) attending inde- pendent schools (under arrange- ments made by the Authority)	1	2	8	4	—	3	2	1	4	25
(iii) Boarded in Homes and not already in- cluded in (i) or (ii)	—	—	—	—	—	—	—	—	—	—
TOTAL (c)	1	2	8	5	117	4	62	3	4	206
d. Number of Handi- capped Pupils being educated under arrange- ments made under Sec. 56 of the Education Act, 1944										
(i) In Hospitals	—	—	—	—	—	—	—	—	—	—
(ii) In other groups, e.g. Units for Spastics	—	—	—	—	—	—	—	—	—	—
(iii) At Home	2	—	—	—	—	2	—	—	—	4
e. Number of Handi- capped Pupils from the area re- quiring places in Special Schools (including any such children who are temporary receiving home tuition or whose parents have not yet consented to their attending a Special School):—										
(i) Day	—	—	—	—	—	—	2	—	—	2
(ii) Boarding	1	—	—	—	—	2	—	1	1	5

Deaf Children. In December, 1954, the number of deaf and partially deaf children being educated in residential special schools were:—

	Partially Deaf	Deaf
Royal Cross School for the Deaf, Preston	2	....
Thomasson Memorial School for the Deaf, Bolton ....	—	....
Mary Hare Grammar School for the Deaf, Newbury ....	—	....
St. John's Institution for the Deaf, Boston Spa	2	....
Royal Residential School for the Deaf, Manchester	4	....

No deaf or partially deaf children were admitted to or discharged from special schools during the year.

Blind Children. In December, 1954, the number of blind and partially sighted children being educated in residential special schools were:—

	Partially Sighted	Blind
Condover School for Blind Children, Shrewsbury	1	....
Preston Residential School for Partially Sighted Children, Preston —	2	—

During the year one partially sighted pupil was discharged from the Preston Residential Special School for Partially Sighted Children on attaining the age of 16 years and took up employment in a local foundry.

A blind boy who is also physically handicapped and a blind girl who is also educationally sub-normal were receiving home tuition at the end of the year.

Epileptic Pupils. Nine boys and four girls who suffer from epilepsy were in attendance at ordinary day schools at the end of the year. Of these nine suffer from major and four from minor epilepsy. Eleven have been under supervision for several years and two were new cases. During the year two cases were admitted to the Residential Special School of the Maghull Home for Epileptics, Liverpool and four were in attendance there at the end of the year.

Diabetic Pupils. No diabetic children of either school or pre-school age are known to the staff of the School Health or Child Welfare Services, and none is in attendance at the Diabetic Clinic of Victoria Hospital.

Child Guidance. During the year 134 children made a total of 415 visits to the Clinic. Most of the children were referred to the Clinic by headteachers, sometimes directly, but more usually through the School Medical Officers.

Other children were referred to the Clinic by the Juvenile Court and other Social Workers. In some cases the contact was initiated by the parents.

Approximately three quarters of the cases were educational, the children being referred because of failure to make progress in school. In 32 cases the referral was on account of some personality or behaviour problem. In connection with these cases 157 visits were made to schools.

The recommendations made by the Educational Psychologist were:—

Ordinary schools with modified treatment	....	....	....	63
For transfer to other schools	....	....	....	7
Ordinary schools with education as E.S.N. pupils	....	....	....	23
Education in Day Special School as E.S.N. Pupils	....	....	....	15
Report to Local Authority as Ineducables	....	....	....	4
Residential Special School for Maladjusted Pupils	....	....	....	6
Residential Special School for Physically Handicapped Pupils	....	....	....	2
Residential Special School for Epileptic Pupils	....	....	....	2
Placement in a Foster Home	....	....	....	1
Under observation	....	....	....	11

The Treatment of Speech Defects. The speech therapist took up her appointment in mid-February, 1954 after a lapse of three weeks following the resignation of her predecessor. In addition to the children who were receiving treatment under the previous speech therapist and whose treatment has been continued, 86 new cases were referred to the speech therapist by the School medical officers.

Of these, 48 have been accepted for treatment, leaving 38 new cases waiting to commence treatment. During the twelve months under review 148 children were given treatment for speech defects. Of this number 76 were dyslalics, 56 stammerers, 6 were cases of delayed speech development, 5 had cleft palate and 5 were voice disorders.

By the end of the year 33 patients had been discharged from treatment and 10 were under observation only. Of the 148 cases seen, 104 were boys and 44 girls. 137 were in attendance at primary and secondary schools, whilst 11 attended special schools. The children made a total of 2,220 attendances for speech therapy during the year. In addition to this the speech therapist interviewed and advised 52 parents with regard to their children who were referred to the Speech Clinic.

"Light" Therapy was given to 54 School children at the School Clinic, the total treatments being 600. These children were suffering from debilitating conditions, respiratory and nutritional defects, etc.

Delicate Pupils. Twenty-four children who were classified as "delicate" and ascertained for the first time during 1954 were admitted to the Day Open Air School.

The Day Open Air School. Children classified as "delicate" and others handicapped in various ways, including a few from the adjoining districts of Lancashire County, are educated in the Open Air School.

The following are statistics for the Open Air School for the year, 1954:—

	Boys	Girls	Total
Admitted during 1954	13	11	24
Discharged during 1954	12	13	25
Average number of children on roll	....	....	120
Average attendance throughout the year	....	....	95
Average Duration of Stay of those Discharged	—3·5	years.	
Average gain in Weight since admission of those discharged	—25	lbs.	
Average Gain in Weight per child during the year	—7·8	lbs.	

Reasons for Admission:—

Respiratory Diseases	....	....	....	....	....	....	4
General Debility	....	....	....	....	....	....	8
Asthma	....	....	....	....	....	....	3
Nervous Debility	....	....	....	....	....	....	3
Non-active Tuberculosis	....	....	....	....	....	....	1
Cardiac Diseases	....	....	....	....	....	....	3
Osteomyelitis	....	....	....	....	....	....	1
Minor Epilepsy	....	....	....	....	....	....	1
							—
							24
							—

Physically Handicapped Pupils. At 1st December, 1954, eighty-five pupils were classified as physically handicapped. Of these one was in a boarding school and three were in a residential independent school. Two physically handicapped pupils were receiving home tuition, one of whom was ascertained as in need of residential special school education, but whose parents were not prepared to give their consent, and one child in need of residential school education was awaiting placement. Seventy-eight children, although physically handicapped, were able to attend ordinary day schools.

Tuberculosis. All cases of definite or suspected respiratory tuberculosis were referred to the chest physician, who arranged for appropriate treatment or supervision. Reference is made on page 25 to the survey of school children undertaken by the Mass Miniature Radiography Units.

MISCELLANEOUS.

Medical inspection or treatment of pupils attending the Municipal College and School of Art as part-time students, and Evening Continuation Classes is not undertaken.

14 children were submitted to the school medical officer for medical examination regarding fitness to take part in entertainments.

The school medical officers examined 150 children under the Byelaws for regulating the Employment of Children and Street Trading.

I am indebted to the Director of Education for the following information.

Employment of children out of school hours in the sale of milk and newspapers, etc.

Occupations	Number of Children Employed at 31st Dec.
Delivery of Newspapers	218
Delivery of Milk	6
Carrying or Delivery of Food or Parcels	9
Entertainments	11
	<hr/>
	244
	<hr/>

Two hundred and twenty one certificates were issued during the year and 212 had ceased. No licences were granted in respect of street trading by young persons between the ages of 16 and 18 years. No licences were suspended, revoked or refused.

MINISTRY OF EDUCATION.

MEDICAL INSPECTION RETURNS.
YEAR ENDED 31st DECEMBER, 1954.

LOCAL EDUCATION AUTHORITY, BURNLEY.

Table I.

Medical Inspection of Pupils attending maintained Primary and Secondary Schools (including Special Schools).

(A) PERIODIC MEDICAL INSPECTIONS.

Age Groups inspected and number of children examined in each.

Entrants	....	....	....	....	....	....	1695
Second Age Group	....	....	....	....	....	....	1332
Third Age Group	....	....	....	....	....	....	1042
						Total	4069
Additional Periodic Inspections	....	....	....	....	....	....	612
						Grand Total	4681

(B) OTHER INSPECTIONS.

Number of Special Inspections	....	....	....	....	1529
Number of Re-Inspections	....	....	....	....	5578
				Total	7107

(C) PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin).

Age Groups Inspected (1)	For Defective Vision (excluding Squint) (2)	For any of the other conditions recorded in Table II A (3)	Total individual pupils (4)
Entrants	....	15	222
Second Age Group	....	53	96
Third Age Group	....	47	51
	Total	115	369
Additional Periodic Inspections		8	85
Grand Total	....	123	454
			571

Table II. (a) Return of Defects found by Medical Inspection in the year ended
31st December, 1954.

Defect Code No.	DEFECT OR DISEASE (1)	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		No. of Defects		Requiring treatment (2)	Requiring to be kept under observation but not requiring treatment (3)
4	Skin	49	264	85	11
5	Eyes—	123	110	238	29
	a. Vision				
	b. Squint	71	35	29	1
	c. Other	8	16	63	35
6	Ears—	8	31	15	2
	a. Hearing				
	b. Otitis Media	17	52	8	—
	c. Other	13	11	39	16
7	Nose or Throat	82	720	92	42
8	Speech....	36	56	29	11
9	Cervical Glands	1	50	7	6
10	Heart and Circulation	6	57	9	5
11	Lungs	29	213	28	14
12	Developmental—				
	a. Hernia	4	24	3	2
	b. Other	7	90	10	2
13	Orthopaedic—				
	a. Posture	9	48	6	2
	b. Flat Foot	9	15	5	1
	c. Other	63	164	46	13
14	Nervous system—				
	a. Epilepsy	—	8	5	—
	b. Other	8	100	18	5
15	Psychological—				
	a. Development	5	1	8	—
	b. Stability	8	13	23	4
16	Other	61	44	316	19

(b) Classification of the general condition of pupils inspected during the year in
the age groups.

Age Groups (1)	Number of Pupils Inspected (2)	A. (Good) (3)		B. (Fair) (4)		C. (Poor) (5)	
		No. (6)	% of col. 2 (7)	No. (8)	% of col. 2 (9)	No. (10)	% of col. 2 (11)
Entrants....	1695	1051	62.0	637	37.6	7	0.4
Second Age Group	1332	796	59.8	534	40.1	2	0.1
Third Age Group	1042	690	66.2	352	33.8	—	—
Additional Periodic Inspections	612	419	68.5	192	31.4	1	0.2
Total	4681	2956	63.2	1715	36.6	10	0.1

Table III.

Infestation with Vermin.

(i)	Total number of examinations in the schools by the school nurses or other authorised persons ....	....	....	....	....	....	44,295
(ii)	Total number of individual pupils found to be infested ....	....	....	....	....	....	555
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ....	....	....	....	....	....	98
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) ....	....	....	....	....	....	4

Table IV.

Treatment of Pupils attending Maintained Primary and Secondary Schools (Including Special Schools).**GROUP I. DISEASES OF THE SKIN.**

(Excluding uncleanliness, for which see Table III).

	Number of cases treated or under treatment during the year	
	by the Authority	otherwise
Ringworm— (i) Scalp	—	—
(ii) Body	3	—
Scabies	—	—
Impetigo	31	1
Other skin diseases	48	47
	Total	82
		48

GROUP II. EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with	
	by the Authority	otherwise
External and other, excluding errors of refraction and squint	63	10
Errors of refraction (including squint)	982	151
	Total	1045
		161
Number of pupils for whom spectacles were (a) Prescribed	657	135
(b) Obtained	661	135

GROUP III. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases treated by the Authority otherwise	
Received operative treatment—		
(a) for diseases of the ear	—	—
(b) for adenoids and chronic tonsillitis	28	59
(c) for other nose and throat conditions	5	—
Received other forms of treatment	4	22
Total	37	81

GROUP IV. ORTHOPÆDIC AND POSTURAL DEFECTS.

	Number of cases treated	
	by the Authority	Otherwise
(a) Number treated as in-patients in hospitals	12	
(b) Number treated otherwise, e.g., in clinics or out-patients departments	111	31

GROUP V. CHILD GUIDANCE TREATMENT.

	Number of cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of pupils treated at Child Guidance Clinics	134	1

GROUP VI. SPEECH THERAPY.

	Number of cases treated	
	by the Authority	Otherwise
Number of pupils treated by Speech Therapists	148	1

GROUP VII. OTHER TREATMENT GIVEN.

	Number of cases treated	
	by the Authority	Otherwise
(a) Miscellaneous minor ailments	249	69
(b) Other than (a) above (specify)		
1. Minor Ear Defects	40	20
2. Artificial Light	56	1
Total	345	90

Table V.

Dental Inspection and treatment carried out by the Authority.

(1) Number of pupils inspected by the Authority's Dental Officers:—							
(a) At Periodic Inspections ....	....	....	....	....	....	....	11,196
(b) As Specials....	....	....	....	....	....	....	1,432
					Total(1)	....	12,628
(2) Number found to require treatment	....	....	....	....	....	....	6,311
(3) Number offered treatment	....	....	....	....	....	....	5,663
(4) Number actually treated ....	....	....	....	....	....	....	3,319
(5) Attendances made by pupils for treatment	....	....	....	....	....	....	5,411
(6) Half-days devoted to Periodic Inspection	....	....	....	....	....	....	101
	Treatment	....	....	....	....	....	865
					Total (6)	....	966
(7) Fillings — Permanent Teeth	....	....	....	....	....	....	1,304
	Temporary Teeth	....	....	....	....	....	79
					Total (7)	....	1,383
(8) Number of teeth filled							
	Permanent Teeth	....	....	....	....	....	1,286
	Temporary Teeth	....	....	....	....	....	79
					Total (8)	....	1,365
(9) Extractions—							
	Permanent Teeth	....	....	....	....	....	1,431
	Temporary Teeth	....	....	....	....	....	4,893
					Total (9)	....	6,324
(10) Administration of general anæsthetics for extraction	....	....	....	....	....	....	2,328
(11) Other operations—							
	Permanent Teeth	....	....	....	....	....	1,315
	Temporary Teeth	....	....	....	....	....	8
					Total (11)	....	1,323

